PUF RUF	Variable	LABEL
***		CVFCVV 10.10
	A10	CHECK: <18,18+
	A10	NAME's living situation
	A10a	Medicaid institution
	A11_MTH	Month/yr NAME last lived w/ respondent
	A11_YR	Month/yr NAME last lived w/ responden
	A12	CHECK: A11 > 1 year
	A16	CHECK: age <18, 18+
	A17	Living w/ spouse, child, roommates, alone
X		Who calling
	A20	Relationship to NAME
	A20_test	CHECK: Age < 18, or 18+
	A21_mths	How long has been living there - months
	A21_yrs	How long has been living there- years
	A22	CHECK: living in a residential facility
	A23	CHECK: A21=< or > 12 months
	A25	CHECK: Age <18, 18+
	A29	Introduction
X		Speak to parent/guardian (P/G)
	A30	Explain letter and begin interview
	A32	Read letter and begin interview
	A33	NAME's gender
X	A34_day	NAME's DOB- day
	A34_mth	NAME's DOB - month
	A34_yr	NAME's DOB- year
X	A35	CHECK: Number Of DOB match preload
	A36	Applied for Suppl. Security Inc. or SSI benef
	A39a1	CHECK: contiguous United States
X	A39a_st	NAME's state of residence
X	A39b	Living w/ respondent since birth
X	A40	Year NAME most recently lived w/ resp.
X	A41	Total household count
X	A41a	Total household count
X	A42b_1	Household roster-Gender
X	A42b_10	Household roster-Gender
X	A42b_11	Household roster-Gender
X	A42b_12	Household roster-Gender
X	A42b_13	Household roster-Gender
X	A42b_14	Household roster-Gender
X	A42b_15	Household roster-Gender
X	A42b_2	Household roster-Gender

PUF RUF	Variable	LABEL
17		W 1 11 4 G 1
X	A42b_3	Household roster-Gender
X	A42b_4	Household roster-Gender
X	A42b_5	Household roster-Gender
X	A42b_6	Household roster-Gender
X	A42b_7	Household roster-Gender
X	A42b_8	Household roster-Gender
X	A42b_9	Household roster-Gender
X	A42c_1	Household roster-Age
X	A42c_10	Household roster-Age
X	A42c_11	Household roster-Age
X	A42c_12	Household roster-Age
X	A42c_13	Household roster-Age
X	A42c_14	Household roster-Age
X	A42c_15	Household roster-Age
X	A42c_2	Household roster-Age
X	A42c_3	Household roster-Age
X	A42c_4	Household roster-Age
X	A42c_5	Household roster-Age
X	A42c_6	Household roster-Age
X	A42c_7	Household roster-Age
X	A42c_8	Household roster-Age
X	A42c_9	Household roster-Age
X	A42d_1	Household roster-Relationship
X	A42d_10	Household roster-Relationship
X	A42d_11	Household roster-Relationship
X	A42d_12	Household roster-Relationship
X	A42d_13	Household roster-Relationship
X	A42d_14	Household roster-Relationship
X	A42d_15	Household roster-Relationship
X	A42d_2	Household roster-Relationship
X	A42d_3	Household roster-Relationship
X	A42d_4	Household roster-Relationship
X	A42d_5	Household roster-Relationship
X	A42d_6	Household roster-Relationship
X	A42d_7	Household roster-Relationship
X	A42d_8	Household roster-Relationship
X	A42d_9	Household roster-Relationship
X	A43	CHECK: foster care
X	A44_num	Amt. time NAME living w/ respondent - number
X	A44_per	Amt. time NAME living w/ respondent - period

PUF RUF	Variable	LABEL
X	A45	Residence prior to foster care
	A46	# of times placed in foster care
	A47	Foster care- voluntary or court ordered
	A47_test	CHECK: age < 18 goto Part B
	A48	Main rsn for placement by parents
X	A48_test	CHECK: age < 18 goto Part B
	A49	Main rsn for court ordered placement
X	A49_test	CHECK: age < 18 goto Part B
X	A50	CHECK:spouse/children in household
X	A52	NAME available
X	A55	Introduction
X	A57	Introduction- NAME available
X	A57a	Introduction- proxy available
X	A60a	CHECK: proxy
X	A62_DAY	Proxy- date of death
X	A62_MTH	Proxy- date of death
X	A62_YR	Proxy- date of death
X	A63	Proxy necessary
X	A63a	Name available
X	A64	Proxy available
X	A70	Proxy's relationship w/ NAME
X	A71_1	Reason NAME needs proxy
X	A71_2	Reason NAME needs proxy
	A71_3	Reason NAME needs proxy
X	A71_4	Reason NAME needs proxy
X	A71_5	Reason NAME needs proxy
	A71_6	Reason NAME needs proxy
	A71_7	Reason NAME needs proxy
	A72	Conduct interview now
	A73	Amplifier/TTY accomodation
	A74	Name available
	A76	Name available
	A77	Introduction
	A77C_1	Reason NAME needs proxy - ill
X	A77C_2	Reason NAME needs proxy - mental problem
X	A77C_3	Reason NAME needs proxy - language problem
	A77C_4	Reason NAME needs proxy - hearing problem
X	A77C_5	Reason NAME needs proxy - other
	A77C_6	Reason NAME needs proxy - don't know
X	A77C_7	Reason NAME needs proxy - refused

PUF RUF	Variable	LABEL
37	A 33	
	A77a	Introduction
	A77b	Confirm- NAME needs proxy
	A77d	Name available
	A77e	Speak with NAME
	A77g	Conduct interview now
	A77i	How Related
	A8	NAME lives here
	A81	Name's gender
	A82_day	Name's DOB - day
X	A82_mth	Name's DOB - month
X	A82_yr	Name's DOB - year
X	A83	CHECK: Number Of DOB match preload
X	A84	Applied for SSI
X	A87a1	CHECK: contiguous US
	A87a_st	Name's state of residence
X	A87b	Name's living situation
X	A87c	Medicaid institution
	A89	Living w/ spouse/children/roommates/alone
X	A8_test	CHECK:NAME lives here
X	A9	NAME's living situation
X	A90	Total household count
X	A90a	Total household count
X	A91b_1	Household roster-Gender
X	A91b_10	Household roster-Gender
X	A91b_11	Household roster-Gender
X	A91b_12	Household roster-Gender
X	A91b_13	Household roster-Gender
X	A91b_14	Household roster-Gender
X	A91b_15	Household roster-Gender
X	A91b_2	Household roster-Gender
X	A91b_3	Household roster-Gender
X	A91b_4	Household roster-Gender
X	A91b_5	Household roster-Gender
X	A91b_6	Household roster-Gender
X	A91b_7	Household roster-Gender
X	A91b_8	Household roster-Gender
X	A91b_9	Household roster-Gender
X	A91c_1	Household roster-Age
X	A91c_10	Household roster-Age
X	A91c_11	Household roster-Age

PUF RUF	' Variable	LABEL
X	A91c_12	Household roster-Age
X	A91c_13	Household roster-Age
X	A91c_14	Household roster-Age
X	A91c_15	Household roster-Age
X	A91c_2	Household roster-Age
X	A91c_3	Household roster-Age
X	A91c_4	Household roster-Age
X	A91c_5	Household roster-Age
X	A91c_6	Household roster-Age
X	A91c_7	Household roster-Age
X	A91c_8	Household roster-Age
X	A91c_9	Household roster-Age
X	A91d_1	Household roster-Relationship
X	A91d_10	Household roster-Relationship
X	A91d_11	Household roster-Relationship
X	A91d_12	Household roster-Relationship
X	A91d_13	Household roster-Relationship
X	A91d_14	Household roster-Relationship
X	A91d_15	Household roster-Relationship
X	A91d_2	Household roster-Relationship
X	A91d_3	Household roster-Relationship
X	A91d_4	Household roster-Relationship
X	A91d_5	Household roster-Relationship
X	A91d_6	Household roster-Relationship
X	A91d_7	Household roster-Relationship
X	A91d_8	Household roster-Relationship
X	A91d_9	Household roster-Relationship
X	A92	CHECK: Rtype
X	A93	CHECK: living with parents
X	A94	CHECK: living with spouse/children
X	A95	Parent/guardian available
X	A97	Proceed with interview
X	A9a	Medicaid institution
X	AGE	Age at Time of Survey Administration
X	AL8321	UNV-ADJUDICATIVE LEVEL OF DDS DECISION
X	AL8322	UNV-ADJUDICATIVE LEVEL OF DDS DECISION
X	APLDTE	OLD UNV FILE
X	APLDTE51	UNV-SSI APPLICATION DATE FROM SSR SELECT
X	APLDTE91	UNV-SSI APPLICATION DATE FROM SSR SELECT
X	APPL_D	Application Date from SSA (Day) (Survey Preload)

PUF	RUF	Variable	LABEL
	X	APPL_M	Application Date from SSA (Month) (Survey Preload)
	X	APPL_Y	Application Date from SSA (Year) (Survey Preload)
	X	AP_JD00	00-Application Date
	X	AP_JD96	96-Application Date
	X	ASTRATA	Analysis Strata(=1)
	X	B1	CHECK: RTYPE
X	X	B10	Limited/prevented compared peers
X	X	B11	Limited b/c of health condition
X	X	B12	Condition expected to last > 12 months
X	X	B13	Physical, occupational speech therapy
X	X	B14	Therapy b/c of health condition
X	X	B15	Condition expected to last > 12 months
X	X	B16	Treatment/counsel b/c health condition
	X	B17	Condition expected to last > 12 months
	X	B18	CHECK: Age <17 or 17 +
X	X	B19	CHECK: Does NAME have a health condition
X	X	B2	Confirm living with spouse or partner
X	X	B20	Prevented from work/school
	X	B21	Limited in work/school
X	X	B22	CHECK: Does NAME have a health condition
X	X	B23	Limited in other ways
X	X	B24	Health condition when applying for SSI
	X	B25_1	What condition-1
	X	B25_2	What condition-2
	X	B25_3	What condition-3
X	X	B26	CHECK: current health condition
	X	B27	Limited by disability compared to peers
	X	B28	Disability affects ability to do things
	X	B29	Severity of health condition
X	X	B3	General health
X	X	B30	Stability of health care needs
	X	B31	CHECK: Age <17, 17+
X	X	B32	Use medical devices or supplies
X		B33	Describe hearing
X		B34	Trouble with vision
	X	B35	Blind
		B36	CHECK: health condition
		B37_1	Main health condition or problem-1
	X	B37_2	Main health condition or problem-2
	X	B37_3	Main health condition or problem-3

PUF	RUF Variable	LABEL
	X B38_num	Duration of health condition/problem - number
	X B38_num X B38_per	Duration of health condition/problem - number
X	X B39_pcr	Other health conditions/problems
X	X B4	Use of additional services
71	X B40_1	What other health conditions/problems-1
	X B40_2	What other health conditions/problems-2
	X B41	CHECK: Age <17, 17+
X	X B42	Use special equipment
	X B43	# days missed school/work for illness
	X B44	# days in bed > half day w/ illness
	X B45	CHECK: Age <5, +5
X	X B46	Need help w/ personal care
	X B47_a	Need help w/ bathing/showering
	X B47_b	Need help w/ dressing
	X B47_c	Need help w/ eating
	X B47_d	Need help w/ getting in/out of bed
	X B47_e	Need help w/ walking
	X B47_f	Need help w/ getting outside
	X B47_g	Need help w/ using/getting to toilet
	X B47_h	Need help w/ getting around inside home
	X B48	CHECK: Age <17, 17+
X	X B49	Need help w/ routine needs
X	X B5	Use more services b/c of hlth condition
	X B50_a	Need help w/ preparing meals
	X B50_b	Need help w/ shopping
	X B50_c	Need help w/ managing money
	X B50_d	Need help w/ using telephone
	X B50_e	Need help w/ heavy housework
	X B50_f	Need help w/ light housework
	X B50_g	Need help w/ going distant places
	X B50_h	Need help w/ managing medication
	X B51	CHECK: living with relatives
X	X B52	Family members provide home health care
	X B53	Hrs/wk family provided home health care
	X B54_10	Care provided by (NAME'S) SPOUSE
	X B54_11	Care provided by (NAME'S) CHILD
	X B54_12	Care provided by FOSTER CHILD LIVING WITH FAMILY
	X B54_13	Care provided by HOUSEMATE/ROOMMATE/FRIEND
	X B54_14	Care provided by ROOMER/BOARDER
	X B54_15	Care provided by OTHER RELATIVE OF (NAME)

PUF	RUF	Variable Variable	LABEL
	X	B54_16	Care provided by OTHER NON-RELATIVE
	X	B54_17	Care provided by COUSIN
	X	B54_18	Care provided by NIECE/NEPHEW
	X	B54_19	Care provided by GUARDIAN
	X	B54_2	Care provided by MOTHER (BIOLOGICAL OR ADOPTIVE)
	X	B54_21	Care provided by SISTER/BROTHER IN LAW
	X	B54_22	Care provided by GREAT GRANDPARENT
	X	B54_3	Care provided by FATHER (BIOLOGICAL OR ADOPTIVE)
	X	B54_4	Care provided by STEP-PARENT OF (NAME)
	X	B54_5	Care provided by FOSTER PARENT OF (NAME)
	X	B54_6	Care provided by UNMARRIED PARTNER OF PARENT
	X	B54_7	Care provided by GRANDPARENT
	X	B54_8	Care provided by BROTHER/SISTER OF (NAME)
	X	B54_9	Care provided by AUNT/UNCLE OF (NAME)
	X	B55	Hours-receive non-family home healthcare
X	X	B56	Pay for non-family home healthcare
	X	B57_AMT	Amount- non-family home healthcare
X	X	B6	Condition expected to last > 12 months
X	X	B7	Need/use more medication than usual
X	X	B8	More meds b/c of health condition
X	X	B9	Condition expected to last > 12 months
	X	BIRTH_00	00-Date of Birth
	X	BIRTH_96	96-Date of Birth
	X	BIRTH_D	Sample Person's Birth Day from SSA File
	X	BIRTH_M	Sample Person's Birth Month from SSA File
	X	BIRTH_Y	Sample Person's Birth Week from SSA File
X	X	BRR_WT1	BRR Pseudo-Replicate Weight 1
X	X	BRR_WT10	BRR Pseudo-Replicate Weight 10
X	X	BRR_WT11	BRR Pseudo-Replicate Weight 11
X	X	BRR_WT12	BRR Pseudo-Replicate Weight 12
X	X	BRR_WT13	BRR Pseudo-Replicate Weight 13
X	X	BRR_WT14	BRR Pseudo-Replicate Weight 14
X	X	BRR_WT15	BRR Pseudo-Replicate Weight 15
X	X	BRR_WT16	BRR Pseudo-Replicate Weight 16
X	X	BRR_WT17	BRR Pseudo-Replicate Weight 17
X	X	BRR_WT18	BRR Pseudo-Replicate Weight 18
X	X	BRR_WT19	BRR Pseudo-Replicate Weight 19
X	X	BRR_WT2	BRR Pseudo-Replicate Weight 2
X	X	BRR_WT20	BRR Pseudo-Replicate Weight 20
X	X	BRR_WT21	BRR Pseudo-Replicate Weight 21

APPENDIX A:
Availability of NSCF Variables on Public (PUF) and Restricted (RUF) Data Files

PUF	RUF Variable	LABEL
v	V DDD WEGG	DDD D
X X	X BRR_WT22 X BRR_WT23	BRR Pseudo-Replicate Weight 22 BRR Pseudo-Replicate Weight 23
X X	X BRR_WT23 X BRR_WT24	BRR Pseudo-Replicate Weight 24
X	-	BRR Pseudo-Replicate Weight 25
X	X BRR_WT25 X BRR_WT26	BRR Pseudo-Replicate Weight 26
X	X BRR_WT27	BRR Pseudo-Replicate Weight 27
X	X BRR_WT28	BRR Pseudo-Replicate Weight 28
X	X BRR_WT29	BRR Pseudo-Replicate Weight 29
X	X BRR_WT3	BRR Pseudo-Replicate Weight 3
X	X BRR_WT30	BRR Pseudo-Replicate Weight 30
X	X BRR_WT31	BRR Pseudo-Replicate Weight 31
X	X BRR_WT32	BRR Pseudo-Replicate Weight 32
X	X BRR_WT33	BRR Pseudo-Replicate Weight 33
X	X BRR_WT34	BRR Pseudo-Replicate Weight 34
X	X BRR_WT35	BRR Pseudo-Replicate Weight 35
X	X BRR_WT36	BRR Pseudo-Replicate Weight 36
X	X BRR_WT37	BRR Pseudo-Replicate Weight 37
X	X BRR_WT38	BRR Pseudo-Replicate Weight 38
X	X BRR_WT39	BRR Pseudo-Replicate Weight 39
X	X BRR_WT4	BRR Pseudo-Replicate Weight 4
X	X BRR_WT40	BRR Pseudo-Replicate Weight 40
X	X BRR_WT41	BRR Pseudo-Replicate Weight 41
X	X BRR_WT42	BRR Pseudo-Replicate Weight 42
X	X BRR_WT43	BRR Pseudo-Replicate Weight 43
X	X BRR_WT44	BRR Pseudo-Replicate Weight 44
X	X BRR_WT45	BRR Pseudo-Replicate Weight 45
X	X BRR_WT46	BRR Pseudo-Replicate Weight 46
X	X BRR_WT47	BRR Pseudo-Replicate Weight 47
X	X BRR_WT48	BRR Pseudo-Replicate Weight 48
X	X BRR_WT49	BRR Pseudo-Replicate Weight 49
X	X BRR_WT5	BRR Pseudo-Replicate Weight 5
X	X BRR_WT50	BRR Pseudo-Replicate Weight 50
X	X BRR_WT51	BRR Pseudo-Replicate Weight 51
X	X BRR_WT52	BRR Pseudo-Replicate Weight 52
X	X BRR_WT53	BRR Pseudo-Replicate Weight 53
X	X BRR_WT54	BRR Pseudo-Replicate Weight 54
X	X BRR_WT55	BRR Pseudo-Replicate Weight 55
X	X BRR_WT56	BRR Pseudo-Replicate Weight 56
X	X BRR_WT57	BRR Pseudo-Replicate Weight 57
X	X BRR_WT58	BRR Pseudo-Replicate Weight 58

PUF	RUF	` Variable	LABEL
X		BRR_WT59	BRR Pseudo-Replicate Weight 59
X	X	-	BRR Pseudo-Replicate Weight 6
X	X	BRR_WT60	BRR Pseudo-Replicate Weight 60
X	X	BRR_WT61	BRR Pseudo-Replicate Weight 61
X	X	BRR_WT62	BRR Pseudo-Replicate Weight 62
X	X	BRR_WT63	BRR Pseudo-Replicate Weight 63
X	X	BRR_WT64	BRR Pseudo-Replicate Weight 64
X	X	BRR_WT65	BRR Pseudo-Replicate Weight 65
X	X	BRR_WT66	BRR Pseudo-Replicate Weight 66
X	X	BRR_WT67	BRR Pseudo-Replicate Weight 67
X	X	BRR_WT68	BRR Pseudo-Replicate Weight 68
X	X	BRR_WT69	BRR Pseudo-Replicate Weight 69
X	X	BRR_WT7	BRR Pseudo-Replicate Weight 7
X	X	BRR_WT70	BRR Pseudo-Replicate Weight 70
X	X	BRR_WT71	BRR Pseudo-Replicate Weight 71
X	X	BRR_WT72	BRR Pseudo-Replicate Weight 72
X	X	BRR_WT8	BRR Pseudo-Replicate Weight 8
X	X	BRR_WT9	BRR Pseudo-Replicate Weight 9
X	X	C10	Delay or forego health care
X	X	C11_a	Reason delay or forgo medical care - Office hrs
X	X	C11_b	Reason delay or forgo medical care - Transportation
X	X	C11_c	Reason delay or forgo medical care - Lack of \$/insurance
X	X	C11_d	Reason delay or forgo medical care - Availability
X	X	C11_e	Reason delay or forgo medical care - Lack of approval-gatekeeping
X	X	C11_f	Reason delay or forgo medical care - Other
			Reason delay or forgo medical care - SM doesn't like
X	X	C11_g	doctors/refuses to go
X	X	C11_h	Reason delay or forgo medical care - Unable to find child care
			Reason delay or forgo medical care - No provider accepts
X	X	C11_i	medcd/ins.
X	X	C11_j	Reason delay or forgo medical care - Just didn't get there
			Reason delay or forgo medical care - Doctor too busy/couldn't get
X	X	C11_k	appt.
X	X	C11_1	Reason delay or forgo medical care - Medical prob. of my own
X	X	C12	Delay or forego dental care
X	X	C13_1	Reason delay or forego dental care - cost
X	X	C13_10	Reason delay or forego dental care - unable to find child care
X	X	C13_11	Reason delay or forego dental care - just didn't get there
X	X	C13_12	Reason delay or forego dental care - unable to find doctor/dentist

PUF	RUF	Variable	LABEL
X	v	C13_13	Reason delay or forego dental care - sample member's health condition/ behavior
X			
Λ	Λ	C13_14	Reason delay or forego dental care - too young for appointment
X	v	C12 2	Reason delay or forego dental care - not covered/approved by
X	X	C13_2 C13_3	health plan Reason delay or forego dental care - no dental insurance
X		C13_3 C13_4	Reason delay or forego dental care - no dental insurance Reason delay or forego dental care - transportation problems
X		C13_4 C13_5	Reason delay of forego dental care - transportation problems Reason delay or forego dental care - other
X		C13_6	Reason delay or forego dental care - other Reason delay or forego dental care - provider can/will not work
Λ	Λ	C13_0	Reason delay or forego dental care - patient doesn't like/refuses to
X	Y	C13_7	go
X		C13_7 C13_8	Reason delay or forego dental care - unable to find child care
11	71	C15_0	Reason delay or forego dental care - can't find provider that accepts
X	X	C13_9	Medicaid/Insurance
X	X	C14	Last dental visit
X		C15	Forego prescription medications
X		C16_1	Reason forego prescription meds - cost
X		C16_10	Reason forego prescription meds - just didn't get there
	11	010_10	Reason forego prescription meds - problem getting prescription
X	X	C16_11	filled
X	X	C16_2	Reason forego prescription meds - no insurance
			Reason forego prescription meds - not covered/approved by health
X	X	C16_3	plan
X		C16_4	Reason forego prescription meds - doctor will not prescribe
X		C16_5	Reason forego prescription meds - transportation problems
X		C16_6	Reason forego prescription meds - other
X		C16_7	Reason forego prescription meds - could not get to doctor
X	X	C16_8	Reason forego prescription meds - doesn't like/refuses medicine
			Reason forego prescription meds - pharmacy did not have
X	X	C16_9	medicine
	X	C17	Check: <3,3+
X	X	C18	Receive mh/sa inpatient treatment
X	X	C19	Inpatient treat for mh, sa, both
	X	C2	CHECK: <18,18+
	X	C20	# hospitaliztions for mh/sa
X	X	C21	Receive mh/sa outpatient treatment
			CHECK: receive inpatient mental health or substance abuse
	X	C22	services
X		C23	Outpatient treatment for mh, sa, both
X	X	C24	# of times mh/sa outpatient treatment

PUF	RUF	Variable	LABEL
	v	C25	Tatal and male make a surrounce
X		C25 C3	Total out pckt mh/sa expenses NAME gives medical consent
Λ		C4	Who gives medical consent
		C5	# doctors visits
		C6	# hospitalizations
	X		# er visits
		C8	# surgeries
		C9	Total out pckt health exp.
		CALL_IN	Date of Last Call to Complete Case
		CMPTOA96	96-Computation Status
		CURSTT51	UNV-CURRENT PAYMENT STATUS FROM SSR SELE
		CURSTT91	UNV-CURRENT PAYMENT STATUS FROM SSR SELE
	X	CUR_SSI	Currently Receiving SSI from SSA File
X	v	C_100_DOLLARS_LESS_1	Household changes to accommodate \$100 less income per month
Λ	Λ	C_100_DOLLARS_LESS_1	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_LESS_10	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_LESS_11	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_LESS_12	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_LESS_13	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_LESS_14	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_LESS_15	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_LESS_16	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_LESS_17	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_LESS_18	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_LESS_19	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_LESS_2	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_LESS_20	Household changes to accommodate \$100 less income per month

APPENDIX A:
Availability of NSCF Variables on Public (PUF) and Restricted (RUF) Data Files

PUF	RUF	Variable	LABEL
X	X	C_100_DOLLARS_LESS_3	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_LESS_4	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_LESS_5	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_LESS_6	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_LESS_7	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_LESS_8	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_LESS_9	Household changes to accommodate \$100 less income per month
X	X	C_100_DOLLARS_MORE_1	Household changes to accommodate \$100 more income per month
X	X	C_100_DOLLARS_MORE_10	Household changes to accommodate \$100 more income per month
X	X	C_100_DOLLARS_MORE_11	Household changes to accommodate \$100 more income per month
X	X	C_100_DOLLARS_MORE_12	Household changes to accommodate \$100 more income per month
X	X	C_100_DOLLARS_MORE_13	Household changes to accommodate \$100 more income per month
X	X	C_100_DOLLARS_MORE_14	Household changes to accommodate \$100 more income per month
X	X	C_100_DOLLARS_MORE_15	Household changes to accommodate \$100 more income per month
X	X	C_100_DOLLARS_MORE_16	Household changes to accommodate \$100 more income per month
X	X	C_100_DOLLARS_MORE_17	Household changes to accommodate \$100 more income per month
X	X	C_100_DOLLARS_MORE_18	Household changes to accommodate \$100 more income per month
X	X	C_100_DOLLARS_MORE_19	Household changes to accommodate \$100 more income per month
X	X	C_100_DOLLARS_MORE_2	Household changes to accommodate \$100 more income per month

PUF	RUF	Variable	LABEL
X	X	C_100_DOLLARS_MORE_3	Household changes to accommodate \$100 more income per month
X	X	C_100_DOLLARS_MORE_4	Household changes to accommodate \$100 more income per month
X	X	C_100_DOLLARS_MORE_5	Household changes to accommodate \$100 more income per month
X	X	C_100_DOLLARS_MORE_6	Household changes to accommodate \$100 more income per month
X	X	C_100_DOLLARS_MORE_7	Household changes to accommodate \$100 more income per month
X	X	C_100_DOLLARS_MORE_8	Household changes to accommodate \$100 more income per month
X	X	C_100_DOLLARS_MORE_9	Household changes to accommodate \$100 more income per month
X	X	C_APPEAL	Appeal
X	X	C_ATTENDED_ SCHOOL	Ever attended school
	X	C_B11	Limited b/c of health condition
	X	C_B12	Condition expected to last > 12 months
	X	C_B14	Therapy b/c of health condition
	X	C_B15	Condition expected to last > 12 months
	X	C_B17	Condition expected to last > 12 months
		C_B19	CHECK: Does NAME have a health condition
X		C_B21	Limited in work/school
		C_B25_1	What condition-1 (collapsed)
		C_B25_2	What condition-2 (collapsed)
		C_B25_3	What condition-3 (collapsed)
X		C_B27	Limited by disability compared to peers
X		C_B28	Disability affects ability to do things
X		C_B29	Severity of health condition
X		C_B35 C_B37_1	Blind Main health condition or problem 1 (colleged)
		C_B37_1 C_B37_2	Main health condition or problem-1 (collapsed) Main health condition or problem-2 (collapsed)
	X	C_B37_2 C_B37_3	Main health condition or problem-3 (collapsed)
X	X	C_B37_5 C_B38	Duration of health condition/problem(in years)
21		C_B40_1	What other health conditions/problems-1 (collapsed)
	X	C_B40_1 C_B40_2	What other health conditions/problems-2 (collapsed)
X		C_B47_A	Need help w/ bathing/showering
X		C_B47_B	Need help w/ dressing
X		C_B47_C	Need help w/ eating

PUF	RUF	Variable	LABEL
X	X	C_B47_D	Need help w/ getting in/out of bed
X	X	C_B47_E	Need help w/ walking
X	X	C_B47_F	Need help w/ getting outside
X		C_B47_G	Need help w/ using/getting to toilet
X	X	C_B47_H	Need help w/ getting around inside home
**	X	C_B5	Use more services b/c of hlth condition
X		C_B50_A	Need help w/ preparing meals
X	X	C_B50_B	Need help w/ shopping
X	X	C_B50_C	Need help w/ managing money
X		C_B50_D	Need help w/ using telephone
X	X	C_B50_E	Need help w/ heavy housework
X	X	C_B50_F	Need help w/ light housework
X		C_B50_G	Need help w/ going distant places
X	X	C_B50_H	Need help w/ managing medication
	X	C_B53	Hrs/wk family provided home health care
	X	C_B57	Amount- non-family home healthcare
	X	C_B6	Condition expected to last > 12 months
	X	C_B8	More meds b/c of health condition
	X	C_B9	Condition expected to last > 12 months
X	X	C_BASIC_SKILLS_TRAINING	Basic skills training
	X	C_BURIAL_EXPENSES	Money set aside for burial expenses
	X	C_C25	Total out pckt mh/sa expenses
	X	C_C9	Total out pckt health exp.
	X	C_CAR1_DEBT	Amount owed on only car
	X	C_CAR1_VALUE	Value of only car
	X	C_CAR2_DEBT	Amount owed on oldest car
	X	C_CAR2_VALUE	Value of oldest care
	X	C_CASH	Cash(at home or somewhere else)
	X	C_CHECKING	Checking Accounts
	X	C_CHILDREN	Number Of Children under Age 18 in HH
X	X	C_CHILD_SUPPORT	Child Support Indicator
	X	C_CHILD_SUPPORT_AMT	Amount- Child support revd
	X	C_CHILD_SUPPORT_AMT_1	Amount- Child support revd
	X	C_CHILD_SUPPORT_AMT_10	Amount- Child support revd
	X	C_CHILD_SUPPORT_AMT_11	Amount- Child support revd

Availability of NSCF Variables on Public (PUF) and Restricted (RUF) Data Files

PUF 1	RUF	Variable	LABEL
	*7		
	X	C_CHILD_SUPPORT_AMT_12	Amount- Child support rcvd
	X	C_CHILD_SUPPORT_AMT_13	Amount- Child support revd
	X	C_CHILD_SUPPORT_AMT_14	Amount- Child support revd
	X	C_CHILD_SUPPORT_AMT_15	Amount- Child support revd
	X	C_CHILD_SUPPORT_AMT_2	Amount- Child support revd
	X	C_CHILD_SUPPORT_AMT_3	Amount- Child support revd
	X	C_CHILD_SUPPORT_AMT_4	Amount- Child support revd
	X	C_CHILD_SUPPORT_AMT_5	Amount- Child support revd
	X	C_CHILD_SUPPORT_AMT_6	Amount- Child support revd
	X	C_CHILD_SUPPORT_AMT_7	Amount- Child support revd
	X	C_CHILD_SUPPORT_AMT_8	Amount- Child support revd
	X	C_CHILD_SUPPORT_AMT_9	Amount- Child support revd
	X	C_CHILD_SUPPORT_RCPT_1	Receipt of child support by household member
	X	C_CHILD_SUPPORT_RCPT_10	Receipt of child support by household member
	X	C_CHILD_SUPPORT_RCPT_11	Receipt of child support by household member
	X	C_CHILD_SUPPORT_RCPT_12	Receipt of child support by household member
	X	C_CHILD_SUPPORT_RCPT_13	Receipt of child support by household member
	X	C_CHILD_SUPPORT_RCPT_14	Receipt of child support by household member

X C_CHILD_SUPPORT_RCPT_15 Receipt of child support by household member

PUF	RUF	Variable	LABEL
	X	C_CHILD_SUPPORT_RCPT_2	Receipt of child support by household member
	X	C_CHILD_SUPPORT_RCPT_3	Receipt of child support by household member
	X	C_CHILD_SUPPORT_RCPT_4	Receipt of child support by household member
	X	C_CHILD_SUPPORT_RCPT_5	Receipt of child support by household member
	X	C_CHILD_SUPPORT_RCPT_6	Receipt of child support by household member
	X	C_CHILD_SUPPORT_RCPT_7	Receipt of child support by household member
	X	C_CHILD_SUPPORT_RCPT_8	Receipt of child support by household member
	X	C_CHILD_SUPPORT_RCPT_9	Receipt of child support by household member
X	X	C_CURRENT_GRADE	Current grade - attending school
	X	C_DG_HLTH_COND_1	Diagnostic Group- Health Condition-1
	X	C_DG_HLTH_COND_2	Diagnostic Group- Health Condition-2
	X	C_DG_HLTH_COND_3	Diagnostic Group- Health Condition-3
	X	C_DG_HLTH_COND_JAIL_1	Diagnostic Group- Health Condition-1(Incarcerated)
	X	C_DG_HLTH_COND_JAIL_2	Diagnostic Group- Health Condition-2(Incarcerated)
	X	C_DG_HLTH_COND_JAIL_3	Diagnostic Group- Health Condition-3(Incarcerated)
	X	C_DG_MAIN_HLTH_COND_1	Diagnostic Group- Main Health Condition-1
	X	C_DG_MAIN_HLTH_COND_2	Diagnostic Group- Main Health Condition-2
	X	C_DG_MAIN_HLTH_COND_3 C_DG_MAIN_HLTH_COND_J	Diagnostic Group- Main Health Condition-3
	X	L_1 C_DG_MAIN_HLTH_COND_J	Diagnostic Group-Main Health Condition-1(Incarcerated)
	X	L_2 C_DG_MAIN_HLTH_COND_J	Diagnostic Group-Main Health Condition-2(Incarcerated)
	X	L_3	Diagnostic Group-Main Health Condition-3(Incarcerated)

PUF	RUF	Variable	LABEL
	37	C_DG_OTHER_HLTH_COND_	Pi di G od H H G Pi 1
	X		Diagnostic Group- Other Health Condition-1
	3 7	C_DG_OTHER_HLTH_COND_	D. C. C. Ol H. H. C. IV. A
	X	2	Diagnostic Group- Other Health Condition-2
	X	C_DG_OTH_HLTH_COND_JL_	
	Λ		Diagnostic Group-Other Health Condition-1(Incarcerated)
	X	C_DG_OTH_HLTH_COND_JL_	Diagnostic Group-Other Health Condition-2(Incarcerated)
X		C_DIPLOMA_GED	High School diploma or GED
Λ		C_F13	Out pckt exps - respiratory therapy
		C_F18	Out pekt exps - recreational therapy
		C_F23	Out pekt exps - audiology services
		C_F30	Out pekt exp - other therapy
		C_F35	Out pckt exp - special transit services
		C_F42	Out pckt exp - for personal care attendant
		_ C_F47	Out pckt exp - adult day care services
			Out pckt exp - respite care
	X	C_F59	Out pckt exp - mh care or counseling
	X	C_F63	Out pckt exp - other services
	X	C_F67A_AMT	Out pckt exp - medications - last month
	X	C_F67B_AMT	Out pckt exp - special diet - last month
	X	C_F67C_AMT	Out pckt exp - medical supplies - last month
	X	C_F67D_AMT	Out pckt exp - special clothing - last month
	X	C_F67F_AMT	Out pckt exp - higher hlth insur premiums - last month
		C_F67G_AMT	Out pckt exp - extra phone bill charges - last month
		C_F67H_AMT	Out pckt exp - extra utility bill charges - last month
		C_F67I_AMT	Out pckt exp - other special needs items - last month
		C_F7	Out pckt exps - phy, occup, speech therapy
		C_F71	Out pckt exp - durable med eqpmnt/devices
		C_F72	Total paid - durable med eqpment/devices
X	X	C_FACCT_COUNT	Number of yes responses to FACCT screener questions
X	X	C_FACCT_JAIL_COUNT	Number of yes responses to FACCT screener questions
X	X	C_FAMILY_1	Family - 1
	X	C_FAMILY_2	Family - 2
	X	C_FAMILY_3	Family - 3
X	X	C_FAMILY_HM_HLTH_CARE	Family provided home health care - hrs/wk
		C_FATHER_AGE	Age of Father
	X	C_FATHER_POSITION	Father-Position in Household Roster

PUF	RUF	Variable	LABEL
X	X X	C_FATHER_TYPE C_FOOD_STAMPS	Type of Father Food Stamps Indicator
	X	C_FOOD_STAMPS_AMT	Amount- food stamps revd
	X	C_FOOD_STAMPS_AMT_1	Amount- food stamps revd
	X	C_FOOD_STAMPS_AMT_10	Amount- food stamps revd
	X	C_FOOD_STAMPS_AMT_11	Amount- food stamps revd
	X	C_FOOD_STAMPS_AMT_12	Amount- food stamps revd
	X	C_FOOD_STAMPS_AMT_13	Amount- food stamps revd
	X	C_FOOD_STAMPS_AMT_14	Amount- food stamps revd
	X	C_FOOD_STAMPS_AMT_15	Amount- food stamps revd
	X	C_FOOD_STAMPS_AMT_2	Amount- food stamps revd
	X	C_FOOD_STAMPS_AMT_3	Amount- food stamps revd
	X	C_FOOD_STAMPS_AMT_4	Amount- food stamps revd
	X	C_FOOD_STAMPS_AMT_5	Amount- food stamps revd
	X	C_FOOD_STAMPS_AMT_6	Amount- food stamps revd
	X	C_FOOD_STAMPS_AMT_7	Amount- food stamps revd
	X	C_FOOD_STAMPS_AMT_8	Amount- food stamps revd
	X	C_FOOD_STAMPS_AMT_9	Amount- food stamps revd
	X	C_FOOD_STAMPS_CHLDRN_ 1 C_FOOD_STAMPS_CHLDRN_	Food stamps for just children or both children and adults
	X	C_FOOD_STAMPS_CHLDRN_ 10	Food stamps for just children or both children and adults

$Availability \ of \ NSCF \ Variables \ on \ Public \ (PUF) \ and \ Restricted \ (RUF) \ Data \ Files$

PUF	RUF	Variable	LABEL
		C EOOD STAMPS CHI DDN	
	X	C_FOOD_STAMPS_CHLDRN_	Food stamps for just children or both children and adults
	Λ	C_FOOD_STAMPS_CHLDRN_	1 ood stamps for just children of both children and addits
	X	12	Food stamps for just children or both children and adults
		C_FOOD_STAMPS_CHLDRN_	
	X	13	Food stamps for just children or both children and adults
		C_FOOD_STAMPS_CHLDRN_	
	X	14	Food stamps for just children or both children and adults
		$C_FOOD_STAMPS_CHLDRN_$	
	X	15	Food stamps for just children or both children and adults
		$C_FOOD_STAMPS_CHLDRN_$	
	X	2	Food stamps for just children or both children and adults
		C_FOOD_STAMPS_CHLDRN_	
	X	3	Food stamps for just children or both children and adults
	37	C_FOOD_STAMPS_CHLDRN_	
	X	4	Food stamps for just children or both children and adults
	X	C_FOOD_STAMPS_CHLDRN_5	Food stamps for just shildren or both shildren and adults
	Λ	C_FOOD_STAMPS_CHLDRN_	Food stamps for just children or both children and adults
	X	6	Food stamps for just children or both children and adults
	21	C_FOOD_STAMPS_CHLDRN_	1 ood stamps for just children of both children and additis
	X	7	Food stamps for just children or both children and adults
		C_FOOD_STAMPS_CHLDRN_	1 3
	X	8	Food stamps for just children or both children and adults
		C_FOOD_STAMPS_CHLDRN_	
	X	9	Food stamps for just children or both children and adults
	X	C_FOOD_STAMPS_RCPT_1	Receipt of food stamps by household member
	X	C_FOOD_STAMPS_RCPT_10	Receipt of food stamps by household member
	v	C EOOD STAMPS DODE 11	Descint of food stomes by hoveshold member
	X	C_FOOD_STAMPS_RCPT_11	Receipt of food stamps by household member
	X	C_FOOD_STAMPS_RCPT_12	Receipt of food stamps by household member
	21	6_1 00 <i>D_</i> 517.ivii 5_iXe1 1_12	receipt of rood samps by nodsenord member
	X	C_FOOD_STAMPS_RCPT_13	Receipt of food stamps by household member
			r
	X	C_FOOD_STAMPS_RCPT_14	Receipt of food stamps by household member

PUF	RUF	Variable	LABEL
	X	C_FOOD_STAMPS_RCPT_15	Receipt of food stamps by household member
	X	C_FOOD_STAMPS_RCPT_2	Receipt of food stamps by household member
	X	C_FOOD_STAMPS_RCPT_3	Receipt of food stamps by household member
	X	C_FOOD_STAMPS_RCPT_4	Receipt of food stamps by household member
	X	C_FOOD_STAMPS_RCPT_5	Receipt of food stamps by household member
	X	C_FOOD_STAMPS_RCPT_6	Receipt of food stamps by household member
	X	C_FOOD_STAMPS_RCPT_7	Receipt of food stamps by household member
	X	C_FOOD_STAMPS_RCPT_8	Receipt of food stamps by household member
X	X X	C_FOOD_STAMPS_RCPT_9 C_FOSTER_CARE	Receipt of food stamps by household member Foster Care Indicator
	X	C_FOSTER_CARE_AMT	Amount- Foster Care rcvd
	X	C_FOSTER_CARE_AMT_1	Amount- Foster Care rcvd
	X	C_FOSTER_CARE_AMT_10	Amount- Foster Care rcvd
	X	C_FOSTER_CARE_AMT_11	Amount- Foster Care rcvd
	X	C_FOSTER_CARE_AMT_12	Amount- Foster Care rcvd
	X	C_FOSTER_CARE_AMT_13	Amount- Foster Care rcvd
	X	C_FOSTER_CARE_AMT_14	Amount- Foster Care rcvd
	X	C_FOSTER_CARE_AMT_15	Amount- Foster Care rcvd
	X	C_FOSTER_CARE_AMT_2	Amount- Foster Care rcvd
	X	C_FOSTER_CARE_AMT_3	Amount- Foster Care rcvd

PUF RUF Variable	LABEL
X C_FOSTER_CARE_AMT_4	Amount- Foster Care rcvd
X C_FOSTER_CARE_AMT_5	Amount- Foster Care rcvd
X C_FOSTER_CARE_AMT_6	Amount- Foster Care rcvd
X C_FOSTER_CARE_AMT_7	Amount- Foster Care rcvd
X C_FOSTER_CARE_AMT_8	Amount- Foster Care rcvd
X C_FOSTER_CARE_AMT_9	Amount- Foster Care rcvd
X C_FOSTER_CARE_RCPT_1	Receipt of foster care by household member
X C_FOSTER_CARE_RCPT_10	Receipt of foster care by household member
X C_FOSTER_CARE_RCPT_11	Receipt of foster care by household member
X C_FOSTER_CARE_RCPT_12	Receipt of foster care by household member
X C_FOSTER_CARE_RCPT_13	Receipt of foster care by household member
X C_FOSTER_CARE_RCPT_14	Receipt of foster care by household member
X C_FOSTER_CARE_RCPT_15	Receipt of foster care by household member
X C_FOSTER_CARE_RCPT_2	Receipt of foster care by household member
X C_FOSTER_CARE_RCPT_3	Receipt of foster care by household member
X C_FOSTER_CARE_RCPT_4	Receipt of foster care by household member
X C_FOSTER_CARE_RCPT_5	Receipt of foster care by household member
X C_FOSTER_CARE_RCPT_6	Receipt of foster care by household member
X C_FOSTER_CARE_RCPT_7	Receipt of foster care by household member

PUF	RUF	Variable	LABEL
	X	C_FOSTER_CARE_RCPT_8	Receipt of foster care by household member
	X	C_FOSTER_CARE_RCPT_9	Receipt of foster care by household member
X	X		Evidence of health condition/disability
X	X	C_HEALTH_DISABILITY_JL_I ND	Evidence of health condition/disability
X	X	C_HEALTH_INSURANCE	Health Insurance Indicator
X	X	C_HLTH_COND_COUNT	Number of Health Conditions
	X	C_HLTH_COND_JL_COUNT	Number of Health Conditions
X	X	C_HOUSEHOLD_CHANGES	Household changes to cope with loss of SSI benefits
	X	C_HOUSEHOLD_CHANGES_1	Household changes to cope with loss of SSI benefits - Response 1
	X	C_HOUSEHOLD_CHANGES_2	Household changes to cope with loss of SSI benefits - Response 2
	X	C_HOUSEHOLD_CHANGES_3	Household changes to cope with loss of SSI benefits - Response 3
	X	C_HOUSEHOLD_CHANGES_4	Household changes to cope with loss of SSI benefits - Response 4
	X	C_HOUSEHOLD_CHANGES_5	Household changes to cope with loss of SSI benefits - Response 5
	X	C_HOUSEHOLD_INCOME	Household Income
	X	C_HOUSEHOLD_ITEMS	Value of Household/Personal Items
	X	C_HOUSEHOLD_NUMBER	Number of HH Members
	X X	C_INCOME_COMPARISON C_L10	Income Comparision How long at current domicile
X	X	C_LAST_GRADE_COMPLETE D	Last grade completed - not attending school
X	X	C_LAWYER_APPEAL	Consulted lawyer in making decision to appeal

PUF	RUF	Variable	LABEL
X	X	C_LAWYER_NO_APPEAL	Consulted lawyer/legal aid in making decision not to appeal
	X	C_LIVING_ARRANGEMENTS	Living Arrangements
X	X	C_LOSE_MEDICAID	Lose Medicaid when SSI was lost
		C_LOSE_MEDICAID_MONTH	
X	X	S	Lose Medicaid < or > than 3 months
	X	C_MAIN_COND_JL_COUNT C_MAIN_HLTH_COND_COUN	Number of Health Conditions
X	X	T	Number of Health Conditions
21	X	C_MOTHER_AGE	Age of Mother
	X	C_MOTHER_POSITION	Mother-Position in Household Roster
	X	C_MOTHER_TYPE	Type of Mother
	X		Condition expected to last > 12 months
	X	C_N12	Therapy b/c of health condition
	X	C_N13	Condition expected to last > 12 months
	X	C_N15	Condition expected to last > 12 months
	X	C_N18_1	What health condition/problem (collapsed)
	X	C_N18_2	What health condition/problem (collapsed)
	X	C_N18_3	What health condition/problem (collapsed)
	X	C_N19	Limited by disability compared to peers
X	X	C_N20	Disability affects ability to do things
X	X	C_N21	Severity of NAME's condition
	X	C_N23_1	Main health condition or problem (collapsed)
	X	C_N23_2	Main health condition or problem (collapsed)
	X	C_N23_3	Main health condition or problem (collapsed)
	X	C_N24	Duration of health condition/problem (in Years)
	X	C_N26_1	What other health conditions/problems (collapsed)
		C_N26_2	What other health conditions/problems (collapsed)
	X	C_N29_A	Need help w/ bathing/showering
	X	C_N29_B	Need help w/ dressing
	X	C_N29_C	Need help w/ eating
	X	C_N29_D	Need help w/ getting in/out of bed
	X	C_N29_E	Need help w/ walking
	X	C_N29_F	Need help w/ getting outside
	X	C_N29_G	Need help w/ using/getting to toilet
	X	C_N29_H	Need help w/ getting around inside home
	X	C_N3	Use more services b/c of hlth condition
	X	C_N4	Condition expected to last > 12 months

PUF	RUF	Variable	LABEL
	X	C_N6	Need for prescription medicine
		C_N7	Condition expected to last > 12 months
			Limited b/c of health condition
X	X	C_NO_HLTH_INS_MTHS	No Health Insurance in Last Year-# of months
	X	C_OTHER_ASSET	Other assets(excluding cars/vehicles, home)
X		C_OTHER_HM_HLTH_CARE	Home health care(not family provided) - hrs/wk
X	X	C_OTHER_SOURCES	Other Sources of Income Indicator
	X	C_OTHER_SOURCES_AMT	Amount - revd from ohter sources
	X		Amount - rcvd from ohter sources
		C_OTHER_SOURCES_AMT_1	
	X		Amount - rcvd from ohter sources
	37	C_OTHER_SOURCES_AMT_1	A
	X	1	Amount - rcvd from ohter sources
	X	C_OTHER_SOURCES_AMT_1 2	Amount - rcvd from ohter sources
	Λ	C_OTHER_SOURCES_AMT_1	Amount - revu from onter sources
	X	3	Amount - rcvd from ohter sources
		C_OTHER_SOURCES_AMT_1	
	X	4	Amount - rcvd from ohter sources
		C_OTHER_SOURCES_AMT_1	
	X	5	Amount - rcvd from ohter sources
	X	C_OTHER_SOURCES_AMT_2	Amount - rcvd from ohter sources
	v	C OTHER SOURCES AMT 3	Amount - rcvd from ohter sources
	Λ	C_OTTLK_SOURCES_AWT_5	Amount - revu from onter sources
	X	C_OTHER_SOURCES_AMT_4	Amount - rcvd from ohter sources
	X	C_OTHER_SOURCES_AMT_5	Amount - rcvd from ohter sources
	**		
	X	C_OTHEK_SOURCES_AMT_6	Amount - rcvd from ohter sources
	X	C OTHER SOURCES AMT 7	Amount - rcvd from ohter sources
	11	C_OTHER_SOURCES_MMIT_/	Amount Teva from onter sources
	X	C_OTHER_SOURCES_AMT_8	Amount - rcvd from ohter sources

$Availability \ of \ NSCF \ Variables \ on \ Public \ (PUF) \ and \ Restricted \ (RUF) \ Data \ Files$

PUF	RUF	Variable	LABEL
	X	C_OTHER_SOURCES_AMT_9	Amount - revd from ohter sources
	X	C_OTHER_SOURCES_RCPT_1 C_OTHER_SOURCES_RCPT_1	Receipt of other sources of income by household member
	X	0	Receipt of other sources of income by household member
	X	C_OTHER_SOURCES_RCPT_1 1	Receipt of other sources of income by household member
	X	C_OTHER_SOURCES_RCPT_1 2	Receipt of other sources of income by household member
	X	C_OTHER_SOURCES_RCPT_1 3	Receipt of other sources of income by household member
	X		Receipt of other sources of income by household member
	X	C_OTHER_SOURCES_RCPT_1 5	Receipt of other sources of income by household member
	X	C_OTHER_SOURCES_RCPT_2	Receipt of other sources of income by household member
	X	C_OTHER_SOURCES_RCPT_3	Receipt of other sources of income by household member
	X	C_OTHER_SOURCES_RCPT_4	Receipt of other sources of income by household member
	X	C_OTHER_SOURCES_RCPT_5	Receipt of other sources of income by household member
	X	C_OTHER_SOURCES_RCPT_6	Receipt of other sources of income by household member
	X	C_OTHER_SOURCES_RCPT_7	Receipt of other sources of income by household member
	X	C_OTHER_SOURCES_RCPT_8	Receipt of other sources of income by household member
	X	C_OTHER_SOURCES_RCPT_9	Receipt of other sources of income by household member
X	X	C_OTHER_SSA_BENEFITS	Other SSA Benefits Indicator
	X	C_OTHER_SSA_RCPT_1	Receipt of other SSA benefits by household member
	X	C_OTHER_SSA_RCPT_10	Receipt of other SSA benefits by household member

APPENDIX A:
Availability of NSCF Variables on Public (PUF) and Restricted (RUF) Data Files

PUF RUF Variable	LABEL
X C_OTHER_SSA_RCPT_11	Receipt of other SSA benefits by household member
X C_OTHER_SSA_RCPT_12	Receipt of other SSA benefits by household member
X C_OTHER_SSA_RCPT_13	Receipt of other SSA benefits by household member
X C_OTHER_SSA_RCPT_14	Receipt of other SSA benefits by household member
X C_OTHER_SSA_RCPT_15	Receipt of other SSA benefits by household member
X C_OTHER_SSA_RCPT_2	Receipt of other SSA benefits by household member
X C_OTHER_SSA_RCPT_3	Receipt of other SSA benefits by household member
X C_OTHER_SSA_RCPT_4	Receipt of other SSA benefits by household member
X C_OTHER_SSA_RCPT_5	Receipt of other SSA benefits by household member
X C_OTHER_SSA_RCPT_6	Receipt of other SSA benefits by household member
X C_OTHER_SSA_RCPT_7	Receipt of other SSA benefits by household member
X C_OTHER_SSA_RCPT_8	Receipt of other SSA benefits by household member
X C_OTHER_SSA_RCPT_9	Receipt of other SSA benefits by household member
X C_OTHER_SSA_SSI_RCPT_1	Receipt of other SSI benefits by household member
X C_OTHER_SSA_SSI_RCPT_10	Receipt of other SSI benefits by household member
X C_OTHER_SSA_SSI_RCPT_11	Receipt of other SSI benefits by household member
X C_OTHER_SSA_SSI_RCPT_12	Receipt of other SSI benefits by household member
X C_OTHER_SSA_SSI_RCPT_13	Receipt of other SSI benefits by household member
X C_OTHER_SSA_SSI_RCPT_14	Receipt of other SSI benefits by household member

Availability of NSCF Variables on Public (PUF) and Restricted (RUF) Data Files

PUF	RUF	Variable	LABEL
	X	C_OTHER_SSA_SSI_RCPT_15	Receipt of other SSI benefits by household member
	X	C_OTHER_SSA_SSI_RCPT_2	Receipt of other SSI benefits by household member
	X	C_OTHER_SSA_SSI_RCPT_3	Receipt of other SSI benefits by household member
	X	C_OTHER_SSA_SSI_RCPT_4	Receipt of other SSI benefits by household member
	X	C_OTHER_SSA_SSI_RCPT_5	Receipt of other SSI benefits by household member
	X	C_OTHER_SSA_SSI_RCPT_6	Receipt of other SSI benefits by household member
	X	C_OTHER_SSA_SSI_RCPT_7	Receipt of other SSI benefits by household member
	X	C_OTHER_SSA_SSI_RCPT_8	Receipt of other SSI benefits by household member
	X	C_OTHER_SSA_SSI_RCPT_9	Receipt of other SSI benefits by household member
	X	C_OTHER_SSI_RCPT_10	Receipt of other SSI payments by household member
	X	C_OTHER_SSI_RCPT_11	Receipt of other SSI payments by household member
	X	C_OTHER_SSI_RCPT_12	Receipt of other SSI payments by household member
	X	C_OTHER_SSI_RCPT_13	Receipt of other SSI payments by household member
	X	C_OTHER_SSI_RCPT_14	Receipt of other SSI payments by household member
	X	C_OTHER_SSI_RCPT_15	Receipt of other SSI payments by household member
	X	C_OTHER_SSI_RCPT_2	Receipt of other SSI payments by household member
	X	C_OTHER_SSI_RCPT_3	Receipt of other SSI payments by household member
	X	C_OTHER_SSI_RCPT_4	Receipt of other SSI payments by household member
	X	C_OTHER_SSI_RCPT_5	Receipt of other SSI payments by household member
	X	C_OTHER_SSI_RCPT_6	Receipt of other SSI payments by household member
	X	C_OTHER_SSI_RCPT_7	Receipt of other SSI payments by household member
	X	C_OTHER_SSI_RCPT_8	Receipt of other SSI payments by household member
	X	C_OTHER_SSI_RCPT_9	Receipt of other SSI payments by household member
X	X	C_OTHER_WELFARE	Other Welfare Indicator

$Availability \ of \ NSCF \ Variables \ on \ Public \ (PUF) \ and \ Restricted \ (RUF) \ Data \ Files$

PUF	RUF	Variable	LABEL
	X	C_OTHER_WELFARE_RCPT_1	Receipt of other welfare benefits by household member
		C_OTHER_WELFARE_RCPT_1	
	X	O OTHER WELFARE ROPE 1	Receipt of other welfare benefits by household member
	X	C_OTHER_WELFARE_RCPT_1 1	Receipt of other welfare benefits by household member
	11	C_OTHER_WELFARE_RCPT_1	receipt of outer wertare concerns by nouserious member
	X	2	Receipt of other welfare benefits by household member
		C_OTHER_WELFARE_RCPT_1	
	X	3	Receipt of other welfare benefits by household member
	X	C_OTHER_WELFARE_RCPT_1 4	Receipt of other welfare benefits by household member
	Λ	C_OTHER_WELFARE_RCPT_1	Receipt of other werrare benefits by nousehold member
	X	5	Receipt of other welfare benefits by household member
	X	C_OTHER_WELFARE_RCPT_2	Receipt of other welfare benefits by household member
	37	C OWNER WELLS DE DOME 1	
	X	C_OTHER_WELFARE_RCPT_3	Receipt of other welfare benefits by household member
	X	C OTHER WELFARE RCPT 4	Receipt of other welfare benefits by household member
	X	C_OTHER_WELFARE_RCPT_5	Receipt of other welfare benefits by household member
	X	C_OTHER_WELFARE_RCPT_6	Receipt of other welfare benefits by household member
	X	C OTHER WELFARE RCPT 7	Receipt of other welfare benefits by household member
	21	e_omek_weerneri_/	receipt of other wentare benefits by nousehold member
	X	C_OTHER_WELFARE_RCPT_8	Receipt of other welfare benefits by household member
	X	C_OTHER_WELFARE_RCPT_9	Receipt of other welfare benefits by household member
	X	C_OTH_COND_JL_COUNT	Number of Health Conditions
	Λ	C_OTII_COND_JL_COONT	Number of Heatth Conditions
X	X	C_OTH_HLTH_COND_COUNT	Number of Health Conditions
	X	C_OUT_PCKT_HLTH_EXP	Total out of pocket health expenditures
	37	C DADENTI EADNI MONTH	Descrit 1 Mandala Faminas
	X	C_PARENT1_EARN_MONTH	Parent 1 - Monthly Earnings

PUF	RUF	Variable	LABEL
	X	C_PARENT1_EARN_YR	Parent 1 - annual earnings
X		C_PARENT1_EMPLOYMENT	Parent 1 - Employment
		C_PARENT1_HRS_WK	Parent 1 - Total hours per week employed
	X	C_PARENT1_INCOME	Parent1 earned and unearned income
	X	C_PARENT1_POSITION	Parent1 Position
X	X	C_PARENT1_RACE	Parent1 Race
	X	C_PARENT2_EARN_MONTH	Parent 2 - monthly earnings
	**		
	X	C_PARENT2_EARN_YR	Parent 2 - annual earnings
X	X	C_PARENT2_EMPLOYMENT	Parent 2 - Employment
	X	C_PARENT2_HRS_WK	Parent 2 - Total hours per week employed
	X	C_PARENT2_INCOME	Parent2 earned and unearned income
	X	C_PARENT2_POSITION	Parent2 Position
X	X	C_PARENT2_RACE	Parent2 Race
X	X	C_PENSION_AND_ANNUITY	Pension and Annuity Indicator
	v	C DENSION ANNTY DOT 1	Receipt of pension and annuity payments by household member
	Λ	C_PENSION_ANNTY_RCPT_1	Receipt of pension and annuity payments by nousehold member
	X		Receipt of pension and annuity payments by household member
		C_PENSION_ANNTY_RCPT_1	1 1 71 7
	X	1	Receipt of pension and annuity payments by household member
		C_PENSION_ANNTY_RCPT_1	
	X	2	Receipt of pension and annuity payments by household member
		C_PENSION_ANNTY_RCPT_1	
	X	3	Receipt of pension and annuity payments by household member
		C_PENSION_ANNTY_RCPT_1	
	X	4	Receipt of pension and annuity payments by household member
		C_PENSION_ANNTY_RCPT_1	
	X	5	Receipt of pension and annuity payments by household member
	X	C_PENSION_ANNTY_RCPT_2	Receipt of pension and annuity payments by household member

$Availability \ of \ NSCF \ Variables \ on \ Public \ (PUF) \ and \ Restricted \ (RUF) \ Data \ Files$

PUF	RUF	Variable	LABEL
	X	C DENCION AMNTY DOT 2	Receipt of pension and annuity payments by household member
	Λ	C_FENSION_ANNTI_RCFI_3	Receipt of pension and annuity payments by nousehold member
	X	C_PENSION_ANNTY_RCPT_4	Receipt of pension and annuity payments by household member
	X	C_PENSION_ANNTY_RCPT_5	Receipt of pension and annuity payments by household member
	X	C_PENSION_ANNTY_RCPT_6	Receipt of pension and annuity payments by household member
	X	C_PENSION_ANNTY_RCPT_7	Receipt of pension and annuity payments by household member
	X	C_PENSION_ANNTY_RCPT_8	Receipt of pension and annuity payments by household member
	X	C_PENSION_ANNTY_RCPT_9	Receipt of pension and annuity payments by household member
	X	C_PENSION_ANNUITY_AMT	Amount - pension or annuity rcvd
		C_PENSION_ANNUITY_AMT_	
	X	1 C DENGLON ANNUATY AME	Amount - pension or annuity rcvd
	X	C_PENSION_ANNUITY_AMT_	Amount - pension or annuity rcvd
	21	C_PENSION_ANNUITY_AMT_	7 mount pension of aimary feva
	X		Amount - pension or annuity rcvd
		C_PENSION_ANNUITY_AMT_	
	X	12	Amount - pension or annuity rcvd
	X	C_PENSION_ANNUITY_AMT_ 13	Amount - pension or annuity rcvd
	21	C_PENSION_ANNUITY_AMT_	7 modile pension of aimary leva
	X		Amount - pension or annuity rcvd
		C_PENSION_ANNUITY_AMT_	
	X		Amount - pension or annuity rcvd
	X	C_PENSION_ANNUITY_AMT_ 2	Amount - pension or annuity rcvd
	Λ	C_PENSION_ANNUITY_AMT_	Amount - pension of annuity leve
	X	3	Amount - pension or annuity rcvd
		C_PENSION_ANNUITY_AMT_	
	X	4	Amount - pension or annuity rcvd
	v	C_PENSION_ANNUITY_AMT_	Amount manaian an amountu mana
	X	5	Amount - pension or annuity rcvd

PUF RUF Variable LABEL

X		Amount - pension or annuity rcvd
X	C_PENSION_ANNUITY_AMT_ 7	Amount - pension or annuity rcvd
X	C_PENSION_ANNUITY_AMT_ 8 C_PENSION_ANNUITY_AMT_	Amount - pension or annuity rcvd
X	9	Amount - pension or annuity rcvd
X	C_RETIREMENT_RCPT_1	Receipt of other retirement benefits by household member
X	C_RETIREMENT_RCPT_10	Receipt of other retirement benefits by household member
X	C_RETIREMENT_RCPT_11	Receipt of other retirement benefits by household member
X	C_RETIREMENT_RCPT_12	Receipt of other retirement benefits by household member
X	C_RETIREMENT_RCPT_13	Receipt of other retirement benefits by household member
X	C_RETIREMENT_RCPT_14	Receipt of other retirement benefits by household member
X	C_RETIREMENT_RCPT_15	Receipt of other retirement benefits by household member
X	C_RETIREMENT_RCPT_2	Receipt of other retirement benefits by household member
X	C_RETIREMENT_RCPT_3	Receipt of other retirement benefits by household member
X	C_RETIREMENT_RCPT_4	Receipt of other retirement benefits by household member
X	C_RETIREMENT_RCPT_5	Receipt of other retirement benefits by household member
X	C_RETIREMENT_RCPT_6	Receipt of other retirement benefits by household member
X	C_RETIREMENT_RCPT_7	Receipt of other retirement benefits by household member
X	C_RETIREMENT_RCPT_8	Receipt of other retirement benefits by household member
X X	C_RETIREMENT_RCPT_9 C_SAVINGS	Receipt of other retirement benefits by household member Savings Accounts

PUF	RUF	Variable	LABEL
X	X	C_SCHOOL_CURRENTLY	Currently in school
X	X	C_SM_AL_NAT_AMER_IND	SM - Alaskan Native or American Indian
X		C_SM_ASIAN	Sample Member - Asian
X	X	C_SM_BLACK	SM - Black or African American
	X	C_SM_CAR1_DEBT	Amount owed on only car
	X	C_SM_CAR1_VALUE	Value of only car
	X	C_SM_CAR2_DEBT	Amount owed on oldest car
	X	C_SM_CAR2_VALUE	Value of oldest car
	X	C_SM_CHILDREN	Number of SM Children in HH
	X	C_SM_COUNTRY_OF_ORIGIN	SM - Country of Origin
		C_SM_EARN_MONTH	Sample Member - Monthly Earnings
		C_SM_EARN_YR	Sample Member - Annual Earnings
X	X	C_SM_EMPLOYMENT	Sample Member - Employment
X	X	C_SM_ETHNICITY	Sample Member - Ethnicity
	X	C_SM_GRANDPARENTS	Number of SM Grandparents in HH
		C_SM_HRS_WK	Sample Member - total hours per week employed
	X	C_SM_INCOME_TOTAL	Sample Member Income
	X	C_SM_MARITAL_STATUS	SM - Marital Status
X	X	C_SM_NATHAW_PACISLDR	SM - Native Hawaiian or Other Pacific Islander
X		C_SM_RACE	Name's Race
		C_SM_SPOUSE_EARN_MONT	
	X		Sample Member Spouse - monthly earnings
	X	C_SM_SPOUSE_EARN_YR C_SM_SPOUSE_EMPLOYMEN	Sample Member Spouse - Annual Earnings
	X	T	Sample Member Spouse - employment
	X	C_SM_SPOUSE_HRS_WK	Sample Member Spouse - total hours per week employed
	X	C_SM_SPOUSE_INCOME	Sample Member Spouse Income
	X	C_SM_SPOUSE_POSITION	SM Spouse-Position in Household Roster
		C_SM_SPOUSE_RACE	Name's SP Race

PUF	RUF	Variable	LABEL
X	X	C_SM_WHITE	SM - White
X		C_SPECIAL_ED_EVER	Special education ever
X		C_SPECIAL_ED_FLAG	Special education for children flag
X	X	$C_SPECIAL_ED_LAST_YEAR$	Special education in last 12 months
X	X	C_SPECIAL_ED_NOW	Special education currently
X	X	C_SPECIFIC_JOB_TRAINING	Specific job skills training
	X	C_SSA_BENEFITS_AMT	Amount- Other SSA benefits Received
	X	C_SSA_BENEFITS_AMT_1	Amount- Other SSA benefits Received
	X	C_SSA_BENEFITS_AMT_10	Amount- Other SSA benefits Received
	X	C_SSA_BENEFITS_AMT_11	Amount- Other SSA benefits Received
	X	C_SSA_BENEFITS_AMT_12	Amount- Other SSA benefits Received
	X	C_SSA_BENEFITS_AMT_13	Amount- Other SSA benefits Received
	X	C_SSA_BENEFITS_AMT_14	Amount- Other SSA benefits Received
	X	C_SSA_BENEFITS_AMT_15	Amount- Other SSA benefits Received
	X	C_SSA_BENEFITS_AMT_2	Amount- Other SSA benefits Received
	X	C_SSA_BENEFITS_AMT_3	Amount- Other SSA benefits Received
	X	C_SSA_BENEFITS_AMT_4	Amount- Other SSA benefits Received
	X	C_SSA_BENEFITS_AMT_5	Amount- Other SSA benefits Received
	X	C_SSA_BENEFITS_AMT_6	Amount- Other SSA benefits Received
	X	C_SSA_BENEFITS_AMT_7	Amount- Other SSA benefits Received
	X	C_SSA_BENEFITS_AMT_8	Amount- Other SSA benefits Received

PUF :	RUF	Variable	LABEL
	X X	C_SSA_BENEFITS_AMT_9 C_SSA_HLTH_COND_1 C_SSA_HLTH_COND_2 C_SSA_HLTH_COND_3	Amount- Other SSA benefits Received SSA Health Condition-1 SSA Health Condition-2 SSA Health Condition-3
	X	C_SSA_HLTH_COND_JAIL_1	SSA Health Condition Jail-1
	X	C_SSA_HLTH_COND_JAIL_2	SSA Health Condition Jail-2
	X	C_SSA_HLTH_COND_JAIL_3	SSA Health Condition Jail-3
	X	C_SSA_HLTH_COND_JL_1	SSA Main Health Condition Jail-1
	X	C_SSA_HLTH_COND_JL_2	SSA Main Health Condition Jail-2
	X	C_SSA_HLTH_COND_JL_3	SSA Main Health Condition Jail-3
	X	C_SSA_MAIN_HLTH_COND_1	SSA Main Health Condition-1
	X	C_SSA_MAIN_HLTH_COND_2	SSA Main Health Condition-2
	X	C_SSA_MAIN_HLTH_COND_3 C_SSA_OTHER_HLTH_COND	SSA Main Health Condition-3
	X	_1 C_SSA_OTHER_HLTH_COND	SSA Other Health Condition-1
	X	_2 C_SSA_OTH_HLTH_COND_JL	SSA Other Health Condition-2
	X		SSA Other Health Condition Jail-1
	X	_2	SSA Other Health Condition Jail-2
	X	C_SSDI_RCPT_1	Receipt of other SSDI benefits by household member
	X	C_SSDI_RCPT_10	Receipt of other SSDI benefits by household member
	X	C_SSDI_RCPT_11	Receipt of other SSDI benefits by household member
	X	C_SSDI_RCPT_12	Receipt of other SSDI benefits by household member
	X	C_SSDI_RCPT_13	Receipt of other SSDI benefits by household member
	X	C_SSDI_RCPT_14	Receipt of other SSDI benefits by household member
	X	C_SSDI_RCPT_15	Receipt of other SSDI benefits by household member
	X	C_SSDI_RCPT_2	Receipt of other SSDI benefits by household member
	X	C_SSDI_RCPT_3	Receipt of other SSDI benefits by household member

PUF	RUF	Variable	LABEL
	X	C_SSDI_RCPT_4	Receipt of other SSDI benefits by household member
	X	C_SSDI_RCPT_5	Receipt of other SSDI benefits by household member
	X	C_SSDI_RCPT_6	Receipt of other SSDI benefits by household member
	X	C_SSDI_RCPT_7	Receipt of other SSDI benefits by household member
	X	C_SSDI_RCPT_8	Receipt of other SSDI benefits by household member
	X	C_SSDI_RCPT_9	Receipt of other SSDI benefits by household member
X	X	C_SSI_EVER	SSI benefit - ever
X	X	C_SSI_LAST_MONTH	SSI benefit - last month
	X	C_SSI_LAST_MONTH_AMT	SSI benefit - amount last month
X	X	C_SSI_PAYMENTS	SSI Payment Indicator
7.	11	<u></u>	SSI I uj mone mareuror
	X	C_SSI_PAYMENTS_AMT	Amount- SSI rcvd other than NAME
	X	C_SSI_PAYMENTS_AMT_10	Amount- SSI revd other than NAME
	X	C_SSI_PAYMENTS_AMT_11	Amount- SSI rcvd other than NAME
	X	C_SSI_PAYMENTS_AMT_12	Amount- SSI revd other than NAME
	Λ	C_551_1 A 1 WIEN 15_AW11_12	Alliount- 351 fevu omer man ivalvid
	X	C_SSI_PAYMENTS_AMT_13	Amount- SSI revd other than NAME
	X	C_SSI_PAYMENTS_AMT_14	Amount- SSI rcvd other than NAME
	X	C_SSI_PAYMENTS_AMT_15	Amount- SSI revd other than NAME
	X	C_SSI_PAYMENTS_AMT_2	Amount- SSI rcvd other than NAME
	v	C CCI DANAMENTE AME 2	Assessed CCI and allowed as NAME
	X	C_SSI_PAYMENTS_AMT_3	Amount- SSI rcvd other than NAME
	X	C_SSI_PAYMENTS_AMT_4	Amount- SSI rcvd other than NAME
	21	C_551_1711VILIVIS_71VII_+	Amount Softeva outer than 14711412
	X	C_SSI_PAYMENTS_AMT_5	Amount- SSI rcvd other than NAME
	X	C_SSI_PAYMENTS_AMT_6	Amount- SSI rcvd other than NAME
	X	C_SSI_PAYMENTS_AMT_7	Amount- SSI revd other than NAME
	_	a aa a a	
	X	C_SSI_PAYMENTS_AMT_8	Amount- SSI rcvd other than NAME

PUF	RUF Variable	LABEL
	X C_SSI_PAYMENTS_AMT_9	Amount- SSI rcvd other than NAME
X	X C_SSI_STOPPED_JAN_1996	Ever stop SSI since January 1996
X	X C_STATE_ASSISTANCE	General Assistance Indicator
	X C_STATE_ASSIST_RCPT_1	Receipt of state general assistance by household member
	X C_STATE_ASSIST_RCPT_10	Receipt of state general assistance by household member
	X C_STATE_ASSIST_RCPT_11	Receipt of state general assistance by household member
	X C_STATE_ASSIST_RCPT_12	Receipt of state general assistance by household member
	X C_STATE_ASSIST_RCPT_13	Receipt of state general assistance by household member
	X C_STATE_ASSIST_RCPT_14	Receipt of state general assistance by household member
	X C_STATE_ASSIST_RCPT_15	Receipt of state general assistance by household member
	X C_STATE_ASSIST_RCPT_2	Receipt of state general assistance by household member
	X C_STATE_ASSIST_RCPT_3	Receipt of state general assistance by household member
	X C_STATE_ASSIST_RCPT_4	Receipt of state general assistance by household member
	X C_STATE_ASSIST_RCPT_5	Receipt of state general assistance by household member
	X C_STATE_ASSIST_RCPT_6	Receipt of state general assistance by household member
	X C_STATE_ASSIST_RCPT_7	Receipt of state general assistance by household member
	X C_STATE_ASSIST_RCPT_8	Receipt of state general assistance by household member
	X C_STATE_ASSIST_RCPT_9 X C_STOCK X C_ST_ASSIST_AMT X C_ST_ASSIST_AMT_1	Receipt of state general assistance by household member CDS, Notes, Stocks, Mutual Funds, Bonds Amount- state gen assistance rcvd Amount- state gen assistance rcvd

PUF	RUF	Variable	LABEL
	v	C CT ACCICT AMT 10	Amount state can assistance navel
		C_ST_ASSIST_AMT_10 C_ST_ASSIST_AMT_11	Amount- state gen assistance revd Amount- state gen assistance revd
		C_ST_ASSIST_AMT_11 C_ST_ASSIST_AMT_12	Amount- state gen assistance revd
		C_ST_ASSIST_AMT_13	Amount- state gen assistance revd
		C_ST_ASSIST_AMT_14	Amount- state gen assistance revd
		C_ST_ASSIST_AMT_15	Amount- state gen assistance revd
		C_ST_ASSIST_AMT_2	Amount- state gen assistance rovd
		C_ST_ASSIST_AMT_3	Amount- state gen assistance rcvd
		C_ST_ASSIST_AMT_4	Amount- state gen assistance rcvd
		C_ST_ASSIST_AMT_5	Amount- state gen assistance rcvd
	X	C_ST_ASSIST_AMT_6	Amount- state gen assistance rcvd
	X	C_ST_ASSIST_AMT_7	Amount- state gen assistance rcvd
	X	C_ST_ASSIST_AMT_8	Amount- state gen assistance revd
	X	C_ST_ASSIST_AMT_9	Amount- state gen assistance rcvd
	X	C_SURVIVORS_RCPT_1	Receipt of other survivors benefits by household member
	X	C_SURVIVORS_RCPT_10	Receipt of other survivors benefits by household member
	X	C_SURVIVORS_RCPT_11	Receipt of other survivors benefits by household member
	X	C_SURVIVORS_RCPT_12	Receipt of other survivors benefits by household member
	X	C_SURVIVORS_RCPT_13	Receipt of other survivors benefits by household member
	X	C_SURVIVORS_RCPT_14	Receipt of other survivors benefits by household member
	X	C_SURVIVORS_RCPT_15	Receipt of other survivors benefits by household member
	X	C_SURVIVORS_RCPT_2	Receipt of other survivors benefits by household member
	X	C_SURVIVORS_RCPT_3	Receipt of other survivors benefits by household member
	X	C_SURVIVORS_RCPT_4	Receipt of other survivors benefits by household member
	X	C_SURVIVORS_RCPT_5	Receipt of other survivors benefits by household member
	X	C_SURVIVORS_RCPT_6	Receipt of other survivors benefits by household member
	X	C_SURVIVORS_RCPT_7	Receipt of other survivors benefits by household member

PUF	RUF	Variable	LABEL
	X	C_SURVIVORS_RCPT_8	Receipt of other survivors benefits by household member
	X	C_SURVIVORS_RCPT_9	Receipt of other survivors benefits by household member
	X	C_TOTAL_ASSETS_WITH_CA R	Total Household Assets with Car(s)
	X	C_TOTAL_HOUSEHOLD_ASS ETS	Total Household Assets(excluding cars/vehicles, home)
X	X	C_TOTAL_HOUSEHOLD_DEB T	Total Household Debt((excluding cars/vehicles, home)
X	X	C_TOTAL_SM_MEDICAL_DE BT	Total Sample Member Medical Debt
	X	C_UNEARNED_INCOME_1	Unearned Income_1
	X	C_UNEARNED_INCOME_10	Unearned Income_10
	X	C_UNEARNED_INCOME_11	Unearned Income_11
	X	C_UNEARNED_INCOME_12	Unearned Income_12
		C_UNEARNED_INCOME_13	Unearned Income_13
		C_UNEARNED_INCOME_14	Unearned Income_14
		C_UNEARNED_INCOME_15	Unearned Income_15
	X	C_UNEARNED_INCOME_2	Unearned Income_2
	X	C_UNEARNED_INCOME_3	Unearned Income_3
	X	C_UNEARNED_INCOME_4	Unearned Income_4
	X	C_UNEARNED_INCOME_5	Unearned Income_5
	X	C_UNEARNED_INCOME_6	Unearned Income_6
	X	C_UNEARNED_INCOME_7	Unearned Income_7

PUF	RUF	Variable	LABEL
	X	C_UNEARNED_INCOME_8	Unearned Income_8
	X	C_UNEARNED_INCOME_9	Unearned Income_9
X	X	C_VOC_TRAINING_EVER	Vocational training - ever
X	X	C_VOC_TRAINING_NOW	Vocational training - now
X	X	C_VOC_TRAINING_TRIED C_VOC_TRAINING_WAITLIS	Vocational training - attempted in last 12 months
X	X	T	Vocational training - waitlist
X	X	C_WELFARE	Welfare Indicator
	X	C_WELFARE_AMT	Amount-welfare revd last month
		C_WELFARE_AMT_1	Amount-welfare revd last month
	X	C_WELFARE_AMT_10	Amount-welfare revd last month
		C_WELFARE_AMT_11	Amount-welfare rcvd last month
		C_WELFARE_AMT_12	Amount-welfare revd last month
		C_WELFARE_AMT_13	Amount-welfare rcvd last month
		C_WELFARE_AMT_14	Amount-welfare rcvd last month
		C_WELFARE_AMT_15	Amount-welfare rcvd last month
		C_WELFARE_AMT_2	Amount-welfare rcvd last month
		C_WELFARE_AMT_3	Amount-welfare rcvd last month
		C_WELFARE_AMT_4	Amount-welfare rcvd last month
		C_WELFARE_AMT_5	Amount-welfare rcvd last month
		C_WELFARE_AMT_6	Amount-welfare rcvd last month
		C_WELFARE_AMT_7	Amount-welfare rcvd last month
		C_WELFARE_AMT_8	Amount-welfare rcvd last month
		C_WELFARE_AMT_9	Amount-welfare revd last month
	X	C_WELFARE_RCPT_1	Welfare receipt by household member
	X	C_WELFARE_RCPT_10	Welfare receipt by household member
	X	C_WELFARE_RCPT_11	Welfare receipt by household member
	X	C_WELFARE_RCPT_12	Welfare receipt by household member
	X	C_WELFARE_RCPT_13	Welfare receipt by household member
	X	C_WELFARE_RCPT_14	Welfare receipt by household member
	X	C_WELFARE_RCPT_15	Welfare receipt by household member
	X	C_WELFARE_RCPT_2	Welfare receipt by household member
	X	C_WELFARE_RCPT_3	Welfare receipt by household member
	X	C_WELFARE_RCPT_4	Welfare receipt by household member
	X	C_WELFARE_RCPT_5	Welfare receipt by household member

PUF	RUF	Variable	LABEL
	v	C_WELFARE_RCPT_6	Welfare receipt by household member
		C_WELFARE_RCPT_7	Welfare receipt by household member
		C_WELFARE_RCPT_8	Welfare receipt by household member
		C_WELFARE_RCPT_9	Welfare receipt by household member
		C_WELFARE_REQUIREMNT_	Wenter receipt by nousehold member
	X	1	Requirements for household member's welfare
		C_WELFARE_REQUIREMNT_	
	X	10	Requirements for household member's welfare
		C_WELFARE_REQUIREMNT_	•
	X		Requirements for household member's welfare
		C_WELFARE_REQUIREMNT_	
	X	12	Requirements for household member's welfare
		C_WELFARE_REQUIREMNT_	
	X	13	Requirements for household member's welfare
		C_WELFARE_REQUIREMNT_	
	X	14	Requirements for household member's welfare
		$C_WELFARE_REQUIREMNT_$	
	X	15	Requirements for household member's welfare
		C_WELFARE_REQUIREMNT_	
	X	2	Requirements for household member's welfare
		C_WELFARE_REQUIREMNT_	
	X	3	Requirements for household member's welfare
	37	C_WELFARE_REQUIREMNT_	
	X	4	Requirements for household member's welfare
	X	C_WELFARE_REQUIREMNT_	Deguinements for household member's welfers
	Λ	5 C WELEADE DEOLUDEMNT	Requirements for household member's welfare
	X	C_WELFARE_REQUIREMNT_ 6	Requirements for household member's welfare
	71	C_WELFARE_REQUIREMNT_	requirements for nousehold member's werrare
	X		Requirements for household member's welfare
		. C_WELFARE_REQUIREMNT_	requirements for nousehold members werrare
	X	8	Requirements for household member's welfare
		C_WELFARE_REQUIREMNT_	
	X	9	Requirements for household member's welfare
X	X	C_WHY_NO_APPEAL_1	Why no appeal - Did not want to
X	X	C_WHY_NO_APPEAL_10	Why no appeal - Could not take time off work

PUF	RUF	Variable	LABEL
X	X	C_WHY_NO_APPEAL_11	Why no appeal - Still receiving benefits/regained benefits
X	X	C_WHY_NO_APPEAL_12	Why no appeal - NAME not living with respondent
X	X	C_WHY_NO_APPEAL_2	Why no appeal - Did not know how to
X	X	C_WHY_NO_APPEAL_3	Why no appeal - Did not know could appeal
X	X	C_WHY_NO_APPEAL_4	Why no appeal - Could not afford a lawyer
X	X	C_WHY_NO_APPEAL_5	Why no appeal - Did not have a strong case
X	X	C_WHY_NO_APPEAL_6	Why no appeal - Worried we would have to pay SSA
X	X	C_WHY_NO_APPEAL_7	Why no appeal - Thought we would not win
X	X	C_WHY_NO_APPEAL_8	Why no appeal - Other
X	X	C_WHY_NO_APPEAL_9	Why no appeal - Unable to get materials on time
X		D1	Covered by medicaid
	X	D10	Covered by title 5 program
	X	D11	Covered by other health insurance
	X	D12_1	What kind of health other insurance - Medicaid
	X	D12_10	What kind of health other insurance - Other
			What kind of health other insurance - Non profit human service
	X	D12_11	foundation
	X	D12_2	What kind of health other insurance - Medicare
	X	D12_3	What kind of health other insurance - SCHIP
	X	D12_4	What kind of health other insurance - Title V
	X	D12_5	What kind of health other insurance - Medigap
	X	D12_6	What kind of health other insurance - Military
	X	D12_7	What kind of health other insurance - Indian Health Service
	X	D12_8	What kind of health other insurance - Private
	X	D12_9	What kind of health other insurance - Single service
	X	D13	CHECK: any health insurance
	X	D14	Confirm no health insurance
		D15_1	If no, what kind of health insurance - Medicaid
	X	D15_10	If no, what kind of health insurance - Other
	X	D15_2	If no, what kind of health insurance - Medicare

PUF	RUF Variable	LABEL
	X D15_3	If no, what kind of health insurance - SCHIP
	X D15_4	If no, what kind of health insurance - Title V
	X D15_5	If no, what kind of health insurance - Medigap
	X D15_6	If no, what kind of health insurance - Military
	X D15_7	If no, what kind of health insurance - Indian Health Service
	X D15_8	If no, what kind of health insurance - Private
	X D15_9	If no, what kind of health insurance - Single service
	X D16	If yes, who pays for health insurance
X	X D17	No health insurance during last year
	X D18	# months w/out health insur- insured now
	X D19	Time w/out hlth insur- not now insured
	X D20	# mths w/out hlth insur- not insured now
X	X D21	Ever refused payment by health insurance
X	X D22_1	Health insurance payments refused - diagnostic procedures or tests
		Health insurance payments refused - hospitalizations/emergency
X	X D22_10	room
X	X D22_11	Health insurance payments refused - pre-existing condition
X	X D22_12	Health insurance payments refused - ambulance
X	X D22_13	Health insurance payments refused - doctors/office visits
X	X D22_14	Health insurance payments refused - mental health
		Health insurance payments refused - nothing/they would not pay
X	X D22_15	for a thing
X	X D22_16	Health insurance payments refused - braces (unspecified)
		Health insurance payments refused - care products for the sample
X	X D22_17	member
X	X D22_18	Health insurance payments refused - routine visit to the doctor
		Health insurance payments refused - parent's insurance would not
X	X D22_19	cover sample member
		Health insurance payments refused - referral to/care from a
X	X D22_2	specialist
X	X D22_3	Health insurance payments refused - surgery
X	X D22_4	Health insurance payments refused - medications
		Health insurance payments refused - eye exam/glasses/contact
X	X D22_5	lenses
X	X D22_6	Health insurance payments refused - special equipment
X	X D22_7	Health insurance payments refused - therapy services
X	X D22_8	Health insurance payments refused - other
X	X D22_9	Health insurance payments refused - dental care/orthodontia
X	X D23	Wanted hlth insurance- unable to get it

PUF	RUF	Variable	LABEL
X	X	D24_1	Reason unable to get health insurance - pre-existing condition
X	X	D24_10	Reason unable to get health insurance - never tried/applied
X	X	D24_11	Reason unable to get health insurance - problem with paper work
X	X	D24_12	Reason unable to get health insurance - guardianship/ family status problem
X	X	D24_13	Reason unable to get health insurance - didn't qualify (unspecified) Reason unable to get health insurance - respondent makes too
X	X	D24_14	much money
X	X	D24_2	Reason unable to get health insurance - health risks
X	X	D24_3	Reason unable to get health insurance - couldn't afford
X	X	D24_4	Reason unable to get health insurance - other
X	X	D24_5	Reason unable to get health insurance - don't know how to get it
X	X	D24_6	Reason unable to get health insurance - already on Medicaid
X	X	D24_7	Reason unable to get health insurance - age
X	X	D24_8	Reason unable to get health insurance - employer doesn't provide
X	X	D24_9	Reason unable to get health insurance - didn't have a job
	X	D3	CHECK: age <21, 21+
X	X	D4	Covered by s-chip
X	X	D5	Employer/union provided health insurance
	X	D6	CHECK: age <17, 17+
X	X	D7	Who rcvd private insurance
	X	D8	Covered by military health care
			Date of Termination Since 1996 (Day) from SSA File (Survey
	X	DATE96_D	Preload)
			Date of Termination Since 1996 (Month) from SSA File (Survey
	X	DATE96_M	Preload)
			Date of Termination Since 1996 (Year) from SSA File (Survey
	X	DATE96_Y	Preload)
	X	DEATH_00	00-Date of Death
	X	DENCDE51	UNV-DENIAL CODE FROM SSR SELECTED 05/00
	X	DENCDE91	UNV-DENIAL CODE FROM SSR SELECTED 09/00
	X	DENDTE51	UNV-DENIAL DATE FROM SSR SELECTED 05/00
	X	DENDTE91	UNV-DENIAL DATE FROM SSR SELECTED 09/00
	X	DIBDIG00	00-Primary Disability Diag. Code
	X	DIBDIG96	96-Primary Disability Diag. Code
	X	DODC8321	UNV-DATE OF DDS DECISION
	X	DODC8322	UNV-DATE OF DDS DECISION
	X	DODCOHA1	UNV-DATE OF ALJ HEARING DECISION (CCYYMM

PUF	RUF	' Variable	LABEL
	**	D.O. W.G.W.	
	X	DOMEST1	Recipient at WR(1=Yes)
	X	DOMEST10	Recipient at 12/2000 and not at Welfare Reform(1=Yes)
	X	DOMEST11	Recipient at 12/2000 and Ages 17 or 18(1=Yes)
	X	DOMEST2	Recipient at WR, subj to determination(1=Yes)
	X	DOMEST3	Recipient at WR, subj to determination:countinued(1=Yes)
	X	DOMEST4	Recipient at WR, subj to determination:denied(1=Yes)
	X	DOMEST5	Recipient at WR, not subj to determination(1=Yes)
	X	DOMEST6	Not recipient at Welfare Reform(1=Yes)
	X	DOMEST7	Age 17 or 18 at Welfare Reform(1=Yes)
	X	DOMEST8	Recipient at 12/2000(1=Yes)
	X	DOMEST9	Recipient at 12/2000 and at Welfare Reform(1=Yes)
	X	E1	CHECK: RTYPE
X		E10	Suspended or expelled from school
	X	E11	Received special ed services
X	X	E12_1	Where received special ed services - regular school
			Where received special ed services - special school for children w/
X	X	E12_2	special needs
X	X	E12_3	Where received special ed services - home
		E12_4	Where received special ed services - hospital or institution
	X	E12_5	Where received special ed services - provider's office
	X	-	Where received special ed services - other
	X	E12_7	Where received special ed services - vocational/ technical school
X	X	E13	Special ed at day or residential school
	X	E14	CHECK: regular school?
X	X	E15_1	Setting for special ed services - regular school
X	X	E15_2	Setting for special ed services - special room/ resource room
X	X	E15_3	Setting for special ed services - separate class
	X	E15_4	Setting for special ed services - other
X	X	E16	Tried to get additional special ed
X	X	E17	On wait list for special ed
X	X	E19	Received early intervention services
	X	E2	CHECK: Age <3,3-16,17+
	X	E20_1	Where received early intervention - home
	X	E20_2	Where received early intervention - family daycare
	X	E20_3	Where received early intervention - nursery school
	X	E20_4	Where received early intervention - outpatient facility
	X	E20_5	Where received early intervention - classroom
	X	E20_6	Where received early intervention - hospital
	X	E20_7	Where received early intervention - provider's office
	X	E20_8	Where received early intervention - residential facility

PUF	RUF	Variable	LABEL
	v	E20 0	Where received early intervention other
X		E20_9 E21	Where received early intervention - other Tried to get additional early intervention
X		E22	·
Λ	X X	E23	On wait list for early intervention
		E24	CHECK: Age <14, 14+
		E25	Ever received job training/services Currently receiving job training/services
		E26_a	Received training in specific job skills
		E26_b	Training in work interests/abilities
		E26_c	Training in basic skills
X		E26_d	Career counseling
X		E26_e	Job placement/ job hunting skills
X		E26_f	Other job skills
Λ		E27_1	Who provided job training - regular high school
		E27_10	Who provided job training - goodwill/ sheltered workshop
		E27_10	Who provided job training - military
	X	E27_12	Who provided job training - JTPA, other federal program
	X	E27_13	Who provided job training - other
		E27_14	Who provided job training - high school vocational program
	X	E27_15	Who provided job training - regular middle school
		E27_16	Who provided job training - special middle school
		E27_2	Who provided job training - special high school
	X	E27_3	Who provided job training - college/ university
		E27_4	Who provided job training - trade school
		E27_5	Who provided job training - family member or friend
	X	E27_6	Who provided job training - employer
		E27_7	Who provided job training - vocational rehab agency
		E27_8	Who provided job training - developmental disabilities agency
		E27_9	Who provided job training - other agency
X		E28	How much job training
		E29	Tried to get more job training
	X	E3	Currently enrolled in school
	X	E30	On wait list for job training
X	X	E31	Received life skills training
X	X	E32	At 18 will NAME attend schl/job training
X	X	E33	At 18, will NAME work at job
X	X	E34	At 18, will NAME be living independently
X	X	E35	Currently enrolled in school
X	X	E36	Currently in the armed forces
X	X	E37	Ever attended school
X	X	E38	Last grade completed in school

PUF	RUF Variab	le LABEL
	X E39	Earn a diploma or GED
X	X E4	Why not currently enrolled in school
X	X E40	Year NAME graduated
X	X E41	Suspended or expelled from school
	X E42	Type of school NAME is attending
X	X E43	Current grade in school
X	X E44	Suspended or expelled from school
	X E45	Earn a diploma or GED
X	X E46	Taking vocational classes
	X E47	Type of job NAME is preparing for
X	X E48	Currently receiving special ed benefits
X	X E49	Received special ed benefits
	X E5	Ever attended school
X	X E50	Received job training/services
X	X E51	Currently receiving job training/services
X	X E52a	Training in specific job skills
X	X E52b	Training to find out work interests/abil
X	X E52c	Training in basic work skills
X	X E52d	Career counseling
X	X E52e	Help finding/looking for job
X	X E52f	Other training/counseling
	X E52f_1	
	X E52f_2	
	X E52f_3	
	X E52f_4	
	X E52f_5	
X	X E53_1	Who provided job training - regular high school
	X E53_10	
	X E53_1	
	X E53_12	
	X E53_13	
	X E53_14	
	X E53_1:	
		Who provided job training - social service, welfare or
	X E53_10	
		Who provided job training - secondary (high school) vocational
	X E53_1	1 6
	X E53_18	
	X E53_19	
X	X E53_2	Who provided job training - special high school

PUF	RUF	' Variable	LABEL
	X	E53_20	Who provided job training - training program (unspecified)
X	X	E53_3	Who provided job training - special education program
	X	E53_4	Who provided job training - college/ university
X	X	E53_5	Who provided job training - trade school
	X	E53_6	Who provided job training - family member or friend
	X	E53_7	Who provided job training - employer
X	X	E53_8	Who provided job training - vocational rehab agency
	X	E53_9	Who provided job training - developmental disabilities agency
X	X	E54	How much job training
X	X	E55	Tried to get job training
X	X	E56	On wait list for job training
	X	E57	CHECK: ever received SSI
X	X	E58	Referred by SSA for vocational rehab
X	X	E59	Accepted for vocational rehabilitation
	X	E6	Last grade completed in school
X	X	E60	Received household skill instruction
X	X	E61	Currently have an IEP
X	X	E62	Ever had an IEP
X	X	E63	Currently have a IWRP
X	X	E64	Ever had and IWRP
X	X	E7	Current grade in school
	X	E8	Number of days absent from school
X	X	E9	Number of days skipped/refused school
	X	ELG_RD00	00-Date of Current Eligibility
	X	ELG_RD96	96-Date of Current Eligibility
	X	F1	CHECK: RTYPE
X	X	F10	Need respiratory therapy
X	X	F11_1	Why no respiratory therapy - Didn't need the service
X	X	F11_10	Why no respiratory therapy - Couldn't take time off work
X	X	F11_11	Why no respiratory therapy - Other
X	X	F11_12	Why no respiratory therapy - Refused/won't go for the service
X	X	F11_13	Why no respiratory therapy - Not referred for it
X	X	F11_14	Why no respiratory therapy - Unable to schedule it
			Why no respiratory therapy - Doesn't meet the program
	X	F11_15	requirements
X	X	F11_16	Why no respiratory therapy - Didn't ask for/ apply for it
		F11_17	Why no respiratory therapy - School would not help/pay
X		F11_2	Why no respiratory therapy - Provider thinks no longer needed
X	X	F11_3	Why no respiratory therapy - Too expensive/ can't afford

PUF	RUF Variable	LABEL
X	X F11_4	Why no respiratory therapy - Insurance or Medicaid doesn't cover
X	X F11_5	Why no respiratory therapy - Don't know where/how to get it
X	X F11_6	Why no respiratory therapy - On waiting list
X	X F11_7	Why no respiratory therapy - Service not available
	X F11_8	Why no respiratory therapy - Don't like provider
X	X F11_9	Why no respiratory therapy - Transportation problems
	X F12_1	Who paid for respiratory therapy - Sample Member
	_	Who paid for respiratory therapy - Foundation, church, other
	X F12_10	charitable agency
	X F12_11	Who paid for respiratory therapy - SSI
	X F12_12	Who paid for respiratory therapy - Welfare
	X F12_13	Who paid for respiratory therapy - State/ County
		Who paid for respiratory therapy - Family member living in same
	X F12_2	household
		Who paid for respiratory therapy - Family member not living in
	X F12_3	same household
X	X F12_4	Who paid for respiratory therapy - Insurance/ Medicaid
		Who paid for respiratory therapy - School system/ special
	X F12_5	education
	X F12_6	Who paid for respiratory therapy - Title 5 program
	X F12_7	Who paid for respiratory therapy - Early intervention
	X F12_8	Who paid for respiratory therapy - No one/ free
	X F12_9	Who paid for respiratory therapy - Other
	X F13_AMT	Out pckt exps- respiratory therapy - amount
	X F13_AN	Out pckt exps- respiratory therapy - period
X	X F14	Receive recreational therapy
X	X F15	Need recreational therapy
X	X F16_1	Why no recreational therapy - Didn't need the service
	X F16_10	Why no recreational therapy - Couldn't take time off work
X	X F16_11	Why no recreational therapy - Other
X	X F16_12	Why no recreational therapy - Refused/won't go for the service
X	X F16_13	Why no recreational therapy - Not referred for it
X	X F16_14	Why no recreational therapy - Unable to schedule it
		Why no recreational therapy - Doesn't meet the program
X	X F16_15	requirements
X	X F16_16	Why no recreational therapy - Didn't ask for/ apply for it
	X F16_17	Why no recreational therapy - School would not help/pay
X	X F16_2	Why no recreational therapy - Provider thinks no longer needed
X	X F16_3	Why no recreational therapy - Too expensive/ can't afford

PUF	RUF	Variable	LABEL
X	X	F16_4	Why no recreational therapy - Insurance or Medicaid doesn't cover
X	X	F16_5	Why no recreational therapy - Don't know where/how to get it
X	X	F16_6	Why no recreational therapy - On waiting list
X	X	F16_7	Why no recreational therapy - Service not available
X	X	F16_8	Why no recreational therapy - Don't like provider
X	X	F16_9	Why no recreational therapy - Transportation problems
	X	F17_1	Who paid for recreational therapy - Sample Member
			Who paid for recreational therapy - Foundation, church, other
	X	F17_10	charitable agency
	X	F17_11	Who paid for recreational therapy - SSI
	X	F17_12	Who paid for recreational therapy - Welfare
	X	F17_13	Who paid for recreational therapy - State/ county
			Who paid for recreational therapy - Family member living in same
	X	F17_2	household
			Who paid for recreational therapy - Family member not living in
	X	F17_3	same household
X	X	F17_4	Who paid for recreational therapy - Insurance/ Medicaid
			Who paid for recreational therapy - School system/ special
X	X	F17_5	education
	X	F17_6	Who paid for recreational therapy - Title 5 program
	X	F17_7	Who paid for recreational therapy - Early intervention
	X	F17_8	Who paid for recreational therapy - No one/ free
	X	-	Who paid for recreational therapy - Other
		F18_AMT	Out pckt exps- recreational therapy - amount
	X	F18_AN	Out pckt exps- recreational therapy - period
X	X	F19	Received audiology services
X		F2	Parents participated in support group
X		F20	Need audiology services
X		F21_1	Why no audiology services - Didn't need the service
X	X	F21_10	Why no audiology services - Couldn't take time off work
X	X	F21_11	Why no audiology services - Other
X		F21_12	Why no audiology services - Refused/won't go for the service
X		F21_13	Why no audiology services - Not referred for it
X	X	F21_14	Why no audiology services - Unable to schedule it
		T04 45	Why no audiology services - Doesn't meet the program
	X	F21_15	requirements
*7	X	F21_16	Why no audiology services - Didn't ask for/ apply for it
X		F21_17	Why no audiology services - School would not help/pay
X	X	F21_2	Why no audiology services - Provider thinks no longer needed

PUF	RUF	Variable	LABEL
X	X	F21_3	Why no audiology services - Too expensive/ can't afford
X	X	F21_4	Why no audiology services - Insurance or Medicaid doesn't cover
X	X	F21_5	Why no audiology services - Don't know where/how to get it
X	X	F21_6	Why no audiology services - On waiting list
X	X	F21_7	Why no audiology services - Service not available
X	X	F21_8	Why no audiology services - Don't like provider
X	X	F21_9	Why no audiology services - Transportation problems
	X	F22_1	Who paid for audiology services - Sample Member
			Who paid for audiology services - Foundation, church, other
	X	F22_10	charitable agency
	X	F22_11	Who paid for audiology services - SSI
	X	F22_12	Who paid for audiology services - Welfare
	X	F22_13	Who paid for audiology services - State/ county
			Who paid for audiology services - Family member living in same
	X	F22_2	household
			Who paid for audiology services - Family member not living in
	X	F22_3	same household
X	X	F22_4	Who paid for audiology services - Insurance/ Medicaid
			Who paid for audiology services - School system/ special
X	X	F22_5	education
	X	F22_6	Who paid for audiology services - Title 5 program
	X	F22_7	Who paid for audiology services - Early intervention
	X	F22_8	Who paid for audiology services - No one/ free
	X	F22_9	Who paid for audiology services - Other
	X	F23_AMT	Out pckt exps- audiology services - amount
	X	F23_AN	Out pckt exps- audiology services - period
	X	F24	CHECK: Age <18, 18+
X	X	F25	Receive any other therapy
	X	F26_1	What kind of other therapy - respiratory therapy
	X	F26_2	What kind of other therapy - recreational therapy
	X	F26_3	What kind of other therapy - other
	X	F26_4	What kind of other therapy - physical therapy
X	X	F27	Need other therapy
X	X	F28_1	Why no other therapy - Didn't need the service
X	X	F28_10	Why no other therapy - Couldn't take time off work
X	X	F28_11	Why no other therapy - Other
X		F28_12	Why no other therapy - Refused/won't go for the service
X	X	F28_13	Why no other therapy - Not referred for it
X	X	F28_14	Why no other therapy - Unable to schedule it

PUF	RUI	Variable	LABEL
X		F28_15	Why no other therapy - Doesn't meet the program requirements
X		F28_16	Why no other therapy - Didn't ask for/ apply for it
X	X	F28_17	Why no other therapy - School would not help/pay
X	X	_	Why no other therapy - Provider thinks no longer needed
X		F28_3	Why no other therapy - Too expensive/ can't afford
X		F28_4	Why no other therapy - Insurance or Medicaid doesn't cover
X	X	-	Why no other therapy - Don't know where/how to get it
X		F28_6	Why no other therapy - On waiting list
X		F28_7	Why no other therapy - Service not available
X	X	-	Why no other therapy - Don't like provider
X		F28_9	Why no other therapy - Transportation problems
	X	F29_1	Who paid for other therapy- Sample Member
	37	F20, 10	Who paid for other therapy- Foundation, church, other charitable
	X	F29_10	agency
	X	F29_11	Who paid for other therapy- SSI
	X	F29_12	Who paid for other therapy. State / country
	Λ	F29_13	Who paid for other therapy- State/ county
	v	E20. 2	Who paid for other therapy- Family member living in same
	X	F29_2	household
	v	F29_3	Who paid for other therapy- Family member not living in same household
		-	
	X X	F29_5	Who paid for other therapy- Insurance/ Medicaid Who paid for other therapy- School system/ special education
	X	_	Who paid for other therapy- Title 5 program
	X		Who paid for other therapy- Title 3 program Who paid for other therapy- Early intervention
	X	F29_8	Who paid for other therapy- No one/ free
	X	F29_9	Who paid for other therapy- Other
X	X	F3	Received phy, occup, speech therapy
21	X	F30_AMT	Out pckt exp- other therapy - amount
		F30_AN	Out pckt exp- other therapy - period
X	X		Receive special transportation services
X		F32	Need special transportation services
X		F33_1	Why not receive special transit services - Didn't need the service
			Why not receive special transit services - Couldn't take time off
X	X	F33_10	work
X	X	F33_11	Why not receive special transit services - Other
			Why not receive special transit services - Refused/won't go for the
X	X	F33_12	service
X	X	-	Why not receive special transit services - Not referred for it
X	X	F33_14	Why not receive special transit services - Unable to schedule it

PUF	RUF	Variable	LABEL
			Why not receive special transit services - Doesn't meet the program
X	X	F33_15	requirements
71	71	133_13	Why not receive special transit services - Didn't ask for/ apply for
X	X	F33_16	it
			Why not receive special transit services - School would not
	X	F33_17	help/pay
			Why not receive special transit services - Provider thinks no longer
X	X	F33_2	needed
			Why not receive special transit services - Too expensive/ can't
X	X	F33_3	afford
			Why not receive special transit services - Insurance or Medicaid
X	X	F33_4	doesn't cover
			Why not receive special transit services - Don't know where/how to
X	X	F33_5	get it
X	X	F33_6	Why not receive special transit services - On waiting list
X	X	F33_7	Why not receive special transit services - Service not available
X	X	F33_8	Why not receive special transit services - Don't like provider
X	X	F33_9	Why not receive special transit services - transportation problems
	X	F34_1	Who paid for special transit services- Sample Member
			Who paid for special transit services- Foundation, church, other
	X	F34_10	charitable agency
	X	F34_11	Who paid for special transit services- SSI
	X	F34_12	Who paid for special transit services- Welfare
	X	F34_13	Who paid for special transit services- State/ county
			Who paid for special transit services- Family member living in
X	X	F34_2	same household
			Who paid for special transit services- Family member not living in
		F34_3	same household
X	X	F34_4	Who paid for special transit services- Insurance/ Medicaid
			Who paid for special transit services- School system/ special
X	X	F34_5	education
		_	Who paid for special transit services- Title 5 program
		F34_7	Who paid for special transit services- Early intervention
		F34_8	Who paid for special transit services- No one/ free
	X	F34_9	Who paid for special transit services- Other
	X	F35_AMT	Out pokt exp- special transit services - amount
	X X	F35_AN F36	Out pckt exp- special transit services -period
			CHECK: Age <18, 18+
	Λ	F37	Check: supervised group/nursing home

X X F38 Receive personal care attendant services X X F39 Need personal care attendant services X X F4 Need phy, occup, speech therapy X X F40_1 Why no personal care attendant services - Didn't need the service Why no personal care attendant services - Couldn't take time off work X X F40_10 Work X X F40_11 Why no personal care attendant services - Other Why no personal care attendant services - Refused/won't go for service X F40_12 Service X F40_13 Why no personal care attendant services - Not referred for it Why no personal care attendant services - Unable to schedule it Why no personal care attendant services - Doesn't meet the Program requirements				
X X F40_1 Why no personal care attendant services - Didn't need the service work X X F40_11 Why no personal care attendant services - Other Why no personal care attendant services - Refused/won't go for service X F40_13 Why no personal care attendant services - Not referred for it X F40_14 Why no personal care attendant services - Unable to schedule it Why no personal care attendant services - Doesn't meet the X X F40_15 Program requirements Why no personal care attendant services - Didn't ask for/ apply it it Why no personal care attendant services - Provider thinks no longer needed Why no personal care attendant services - Too expensive/ can't afford Why no personal care attendant services - Insurance or Medicain doesn't cover Why no personal care attendant services - Don't know where/ho X X F40_5 X X F40_6 Why no personal care attendant services - On waiting list X X F40_7 Why no personal care attendant services - Service not available X X F40_8 Why no personal care attendant services - Don't like provider	PUF	RUF	Variable	LABEL
X X F40_1 Why no personal care attendant services - Didn't need the service work X X F40_11 Why no personal care attendant services - Other Why no personal care attendant services - Refused/won't go for service X F40_13 Why no personal care attendant services - Not referred for it X F40_14 Why no personal care attendant services - Unable to schedule it Why no personal care attendant services - Doesn't meet the X X F40_15 Program requirements Why no personal care attendant services - Didn't ask for/ apply it it Why no personal care attendant services - Provider thinks no longer needed Why no personal care attendant services - Too expensive/ can't afford Why no personal care attendant services - Insurance or Medicain doesn't cover Why no personal care attendant services - Don't know where/ho X X F40_5 X X F40_6 Why no personal care attendant services - On waiting list X X F40_7 Why no personal care attendant services - Service not available X X F40_8 Why no personal care attendant services - Don't like provider	X	X	F38	Receive personal care attendant services
X X F40_1 Why no personal care attendant services - Didn't need the service Why no personal care attendant services - Couldn't take time off work X X F40_11 Why no personal care attendant services - Other Why no personal care attendant services - Other Why no personal care attendant services - Refused/won't go for service X F40_12 Service X F40_13 Why no personal care attendant services - Not referred for it Why no personal care attendant services - Unable to schedule it Why no personal care attendant services - Doesn't meet the program requirements X X F40_15 Program requirements Why no personal care attendant services - Didn't ask for/ apply to the program requirement services - Provider thinks no longer needed X X F40_2 Service Why no personal care attendant services - Too expensive/ can't afford X X F40_3 Afford Services - Too expensive/ can't doesn't cover Service Service of Why no personal care attendant services - Don't know where/ho to get it X X F40_6 Why no personal care attendant services - On waiting list X X F40_7 Why no personal care attendant services - Service not available X X F40_8 Why no personal care attendant services - Don't like provider				•
X X F40_10 Why no personal care attendant services - Didn't need the service why no personal care attendant services - Couldn't take time off work X X F40_11 Why no personal care attendant services - Other Why no personal care attendant services - Refused/won't go for service X F40_12 X F40_13 X F40_14 Why no personal care attendant services - Not referred for it Why no personal care attendant services - Unable to schedule it Why no personal care attendant services - Doesn't meet the program requirements Why no personal care attendant services - Didn't ask for/ apply it X X F40_15 Why no personal care attendant services - Provider thinks no longer needed Why no personal care attendant services - Too expensive/ can't afford X X F40_3 Afford Why no personal care attendant services - Insurance or Medicain doesn't cover Why no personal care attendant services - Don't know where/ho to get it X X F40_7 Why no personal care attendant services - On waiting list X X F40_8 Why no personal care attendant services - Service not available Why no personal care attendant services - Don't like provider				-
Why no personal care attendant services - Couldn't take time off work X X F40_11				
X X F40_10 X X F40_11 Why no personal care attendant services - Other Why no personal care attendant services - Refused/won't go for service X F40_12 X F40_13 X F40_14 Why no personal care attendant services - Not referred for it Why no personal care attendant services - Unable to schedule it Why no personal care attendant services - Doesn't meet the program requirements Why no personal care attendant services - Didn't ask for/ apply it it Why no personal care attendant services - Provider thinks no longer needed Why no personal care attendant services - Too expensive/ can't X X F40_2 Why no personal care attendant services - Insurance or Medicair doesn't cover Why no personal care attendant services - Don't know where/ho X X F40_5 X X F40_6 Why no personal care attendant services - On waiting list X X F40_7 Why no personal care attendant services - Service not available Why no personal care attendant services - Don't like provider	X	X	F40_1	Why no personal care attendant services - Didn't need the service
X X F40_11 Why no personal care attendant services - Other Why no personal care attendant services - Refused/won't go for service X F40_13 Why no personal care attendant services - Not referred for it Why no personal care attendant services - Unable to schedule it Why no personal care attendant services - Doesn't meet the program requirements Why no personal care attendant services - Didn't ask for/ apply it Why no personal care attendant services - Provider thinks no X X F40_16 Why no personal care attendant services - Provider thinks no I longer needed Why no personal care attendant services - Too expensive/ can't Why no personal care attendant services - Insurance or Medicair Why no personal care attendant services - Don't know where/ho X X F40_5 X X F40_6 Why no personal care attendant services - On waiting list X X F40_7 Why no personal care attendant services - Service not available X X F40_8 Why no personal care attendant services - Don't like provider				Why no personal care attendant services - Couldn't take time off
Why no personal care attendant services - Refused/won't go for service X F40_13	X	X	F40_10	work
X X F40_12 service X F40_13 Why no personal care attendant services - Not referred for it Why no personal care attendant services - Unable to schedule it Why no personal care attendant services - Doesn't meet the program requirements Why no personal care attendant services - Didn't ask for/ apply to it Why no personal care attendant services - Provider thinks no longer needed Why no personal care attendant services - Too expensive/ can't X X F40_3 afford Why no personal care attendant services - Insurance or Medicain doesn't cover Why no personal care attendant services - Don't know where/ho X X F40_5 to get it X X F40_7 Why no personal care attendant services - Service not available X X F40_8 Why no personal care attendant services - Don't like provider	X	X	F40_11	Why no personal care attendant services - Other
X F40_13 Why no personal care attendant services - Not referred for it X F40_14 Why no personal care attendant services - Unable to schedule it Why no personal care attendant services - Doesn't meet the program requirements Why no personal care attendant services - Didn't ask for/ apply it it Why no personal care attendant services - Provider thinks no longer needed Why no personal care attendant services - Provider thinks no longer needed Why no personal care attendant services - Too expensive/ can't afford Why no personal care attendant services - Insurance or Medicain doesn't cover Why no personal care attendant services - Don't know where/ho X X F40_5 X X F40_6 Why no personal care attendant services - On waiting list X X F40_7 Why no personal care attendant services - Service not available X X F40_8 Why no personal care attendant services - Don't like provider				Why no personal care attendant services - Refused/won't go for the
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Why no personal care attendant services - Doesn't meet the program requirements Why no personal care attendant services - Didn't ask for/ apply to the program requirements Why no personal care attendant services - Didn't ask for/ apply to the program requirements Why no personal care attendant services - Provider thinks no longer needed Why no personal care attendant services - Too expensive/ can't afford Why no personal care attendant services - Insurance or Medicain doesn't cover Why no personal care attendant services - Don't know where/ho to get it X X F40_5 X X F40_6 Why no personal care attendant services - On waiting list X X F40_7 Why no personal care attendant services - Service not available X X F40_8 Why no personal care attendant services - Don't like provider			_	
X X F40_15 Why no personal care attendant services - Didn't ask for/ apply to the services of		X	F40_14	Why no personal care attendant services - Unable to schedule it
Why no personal care attendant services - Didn't ask for/ apply to the services - Didn't ask for/ apply to the services - Provider thinks no to the services - Provider thinks no to the services - Provider thinks no longer needed to the services - Too expensive/ can't afford to services - Too expensive/ can't afford to services - Insurance or Medical doesn't cover to service - Don't know where/ho to get it to set it the services - On waiting list to set it the services - Service not available to services - Don't like provider to personal care attendant services - Don't like provider to personal care attendant services - Don't like provider to se				
X X F40_16 Why no personal care attendant services - Provider thinks no X X F40_2 longer needed Why no personal care attendant services - Too expensive/ can't afford Why no personal care attendant services - Insurance or Medicaid doesn't cover Why no personal care attendant services - Don't know where/ho X X F40_5 X X F40_6 Why no personal care attendant services - On waiting list X X F40_7 Why no personal care attendant services - Service not available X X F40_8 Why no personal care attendant services - Don't like provider	X	X	F40_15	
Why no personal care attendant services - Provider thinks no X				Why no personal care attendant services - Didn't ask for/ apply for
X X F40_2 longer needed Why no personal care attendant services - Too expensive/ can't X X F40_3 afford Why no personal care attendant services - Insurance or Medicaid doesn't cover Why no personal care attendant services - Don't know where/ho X X F40_5 to get it X X F40_6 Why no personal care attendant services - On waiting list X X F40_7 Why no personal care attendant services - Service not available X X F40_8 Why no personal care attendant services - Don't like provider	X	X	F40_16	
Why no personal care attendant services - Too expensive/ can't X				
X X F40_3 afford Why no personal care attendant services - Insurance or Medicaid doesn't cover Why no personal care attendant services - Don't know where/ho X X F40_5 to get it X X F40_6 Why no personal care attendant services - On waiting list X X F40_7 Why no personal care attendant services - Service not available X X F40_8 Why no personal care attendant services - Don't like provider	X	X	F40_2	
Why no personal care attendant services - Insurance or Medicaid doesn't cover Why no personal care attendant services - Don't know where/ho X				
X X F40_4 doesn't cover Why no personal care attendant services - Don't know where/ho X X F40_5 to get it X X F40_6 Why no personal care attendant services - On waiting list X X F40_7 Why no personal care attendant services - Service not available X X F40_8 Why no personal care attendant services - Don't like provider	X	X	F40_3	
Why no personal care attendant services - Don't know where/ho X X F40_5 to get it X X F40_6 Why no personal care attendant services - On waiting list X X F40_7 Why no personal care attendant services - Service not available X X F40_8 Why no personal care attendant services - Don't like provider			77.0	
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X X F40_6 Why no personal care attendant services - On waiting list X X F40_7 Why no personal care attendant services - Service not available X X F40_8 Why no personal care attendant services - Don't like provider			710 7	
X X F40_7 Why no personal care attendant services - Service not available X X F40_8 Why no personal care attendant services - Don't like provider			_	
X X F40_8 Why no personal care attendant services - Don't like provider				· -
			_	• •
X X F40_9 Why no personal care attendant services - transportation problem	X	X	F40_8	Why no personal care attendant services - Don't like provider
in the personal care attendant services transportation problem	X	X	F40 9	Why no personal care attendant services - transportation problems
X F41_1 Who paid for personal care attendant services- Sample Member				Who paid for personal care attendant services- Sample Member
				Who paid for personal care attendant services- Foundation, church,
X F41_10 other charitable agency		X	F41 10	
X F41_11 Who paid for personal care attendant services- SSI				
X F41_12 Who paid for personal care attendant services- Welfare				
X F41_13 Who paid for personal care attendant services- State/ county				
Who paid for personal care attendant services- Family member			_	
X F41_2 living in same household		X	F41_2	• •
				Who paid for personal care attendant services- Family member not
X F41_3 living in same household		X	F41_3	•

PUF	RUF	Variable	LABEL
	X	F41_4	Who paid for personal care attendant services- Insurance/ Medicaid
			Who paid for personal care attendant services- School system/
		F41_5	special education
	X	F41_6	Who paid for personal care attendant services- Title 5 program
	X	F41_7	Who paid for personal care attendant services- Early intervention
	X	F41_8	Who paid for personal care attendant services- No one/ free
	X	F41_9	Who paid for personal care attendant services- Other
	X	F42_AMT	Out pckt exp for personal care attendant - amount
	X	F42_AN	Out pckt exp for personal care attendant - period
X	X	F43	Rcvd services from adult day care center
X	X	F44	Need adult day care services
X		F45_1	Why no adult day care services - Didn't need the service
X	X	F45_10	Why no adult day care services - Couldn't take time off work
X	X	F45_11	Why no adult day care services - Other
X	X	F45_12	Why no adult day care services - Refused/won't go for the service
X	X	F45_13	Why no adult day care services - Not referred for it
X	X	F45_14	Why no adult day care services - Unable to schedule it
			Why no adult day care services - Doesn't meet the program
X	X	F45_15	requirements
X	X	F45_16	Why no adult day care services - Didn't ask for/ apply for it
X	X	F45_17	Why no adult day care services - School would not help/pay
X	X	F45_2	Why no adult day care services - Provider thinks no longer needed
X	X	F45_3	Why no adult day care services - Too expensive/ can't afford
			Why no adult day care services - Insurance or Medicaid doesn't
X	X	F45_4	cover
X	X	F45_5	Why no adult day care services - Don't know where/how to get it
X	X	F45_6	Why no adult day care services - On waiting list
X	X	F45_7	Why no adult day care services - Service not available
X	X	F45_8	Why no adult day care services - Don't like provider
X	X	F45_9	Why no adult day care services - transportation problems
	X	F46_1	Who paid for adult day care services- Sample Member
			Who paid for adult day care services- Foundation, church, other
	X	F46_10	charitable agency
	X	F46_11	Who paid for adult day care services- SSI
	X	F46_12	Who paid for adult day care services- Welfare

X F46_13 Who paid for adult day care services- State/ county Who paid for adult day care services- Family member living in same household Who paid for adult day care services- Family member not living in same household X F46_3 same household Who paid for adult day care services- Insurance/ Medicaid Who paid for adult day care services- School system/ special education X F46_5 education X F46_6 Who paid for adult day care services- Title 5 program Who paid for adult day care services- Title 5 program Who paid for adult day care services- No one/ free Who paid for adult day care services- No one/ free Who paid for adult day care services- Other Out post exp- adult day care services- Other Out post exp- adult day care services- other Check: Rtype X F47_AN Out post exp- adult day care services- period Check: Rtype Family receive respite care X F51_1 Why no respite care services - Didn't need the service Why paid for adult day care services - Other Why no respite care services - Didn't need the service Why no respite care services - Other Why no respite care services - Doesn't meet the program requirements Why no respite care services - Doesn't meet the program requirements Why no respite care services - Doesn't meet the program requirements Why no respite care services - Doesn't meet the program requirements Why no respite care services - Doesn't meet the program requirements Why no respite care services - Doesn't meet the program requirements Why no respite care services - Doesn't meet the program requirements Why no respite care services - Doesn't meet the program requirements Why no respite care services - Doesn't meet the program requirements Why no respite care services - Doesn't meet the program requirements Why no respite care services - Doesn't know where/how to get it Why no respite care services - Don't know where/how to get it Why no respite care services - D	PUF	RUF	Variable	LABEL
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X X F51_8 Why no respite care services - Don't like provider X X F51_9 Why no respite care services - transportation problems X F52_1 Who paid for respite care services- Sample Member	X	X	F51_6	Why no respite care services - On waiting list
X X F51_9 Why no respite care services - transportation problems X F52_1 Who paid for respite care services- Sample Member	X	X	F51_7	Why no respite care services - Service not available
X F52_1 Who paid for respite care services- Sample Member	X	X	F51_8	Why no respite care services - Don't like provider
• • • • • • • • • • • • • • • • • • • •	X	X	F51_9	Why no respite care services - transportation problems
		X	F52_1	Who paid for respite care services- Sample Member
Who paid for respite care services- Foundation, church, other				Who paid for respite care services- Foundation, church, other
X F52_10 charitable agency		X	F52_10	charitable agency
X F52_11 Who paid for respite care services- SSI		X	F52_11	Who paid for respite care services- SSI
X F52_12 Who paid for respite care services- Welfare		X	F52_12	Who paid for respite care services- Welfare

PUF	RUF	Variable	LABEL
	X	F52_13	Who paid for respite care services- State/ county
			Who paid for respite care services- Family member living in same
	X	F52_2	household
		_	Who paid for respite care services- Family member not living in
	X	F52_3	same household
	X	F52_4	Who paid for respite care services- Insurance/ Medicaid
			Who paid for respite care services- School system/ special
	X	F52_5	education
	X	F52_6	Who paid for respite care services- Title 5 program
	X	F52_7	Who paid for respite care services- Early intervention
	X	F52_8	Who paid for respite care services- No one/ free
	X	F52_9	Who paid for respite care services- Other
	X	F53_AMT	Out pckt exp- respite care - amount
	X	F53_AN	Out pckt exp- respite care - period
X	X	F55	Receive mental health care or counseling
X	X	F56	Need mental health care or counseling
X	X	F57_1	Why no mh care or counseling - Didn't need the service
X	X	F57_10	Why no mh care or counseling - Couldn't take time off work
X	X	F57_11	Why no mh care or counseling - Other
X	X	F57_12	Why no mh care or counseling - Refused/won't go for the service
	X	F57_13	Why no mh care or counseling - Not referred for it
X	X	F57_14	Why no mh care or counseling - Unable to schedule it
			Why no mh care or counseling - Doesn't meet the program
X	X	F57_15	requirements
X	X	F57_16	Why no mh care or counseling - Didn't ask for/ apply for it
X	X	F57_17	Why no mh care or counseling - Unwilling to seek mh care
	X	F57_18	Why no mh care or counseling
X	X	F57_2	Why no mh care or counseling - Provider thinks no longer neede
X	X	F57_3	Why no mh care or counseling - Too expensive/ can't afford
			Why no mh care or counseling - Insurance or Medicaid doesn't
X	X	F57_4	cover
X	X	F57_5	Why no mh care or counseling - Don't know where/how to get it
X	X	F57_6	Why no mh care or counseling - On waiting list
X	X	F57_7	Why no mh care or counseling - Service not available
X	X	F57_8	Why no mh care or counseling - Don't like provider
X	X	F57_9	Why no mh care or counseling - transportation problems
	X	F58_1	Who paid for mh care or counseling- Sample Member

PUF	RUF	Variable	LABEL
	v	E50 10	Who paid for mh care or counseling- Foundation, church, other
	X	F58_10	charitable agency Who paid for mhoore or counseling. SSI
	X	F58_11	Who paid for mh care or counseling Walfare
	X	F58_12	Who paid for mh care or counseling- Welfare
	Λ	F58_13	Who paid for mh care or counseling- State/ county
X	X	F58_2	Who paid for mh care or counseling- Family member living in same household
			Who paid for mh care or counseling- Family member not living in
	X	F58_3	same household
X	X	F58_4	Who paid for mh care or counseling- Insurance/ Medicaid
			Who paid for mh care or counseling- School system/ special
	X	F58_5	education
	X	F58_6	Who paid for mh care or counseling- Title 5 program
	X	F58_7	Who paid for mh care or counseling- Early intervention
	X	F58_8	Who paid for mh care or counseling- No one/ free
	X	F58_9	Who paid for mh care or counseling- Other
	X	F59_AMT	Out pckt exp- mh care or counseling - amount
	X	F59_AN	Out pckt exp- mh care or counseling - period
X	X	F5_1	Why no phy, occup, speech therapy - Didn't need the service
X	X	F5_10	Why no phy, occup, speech therapy - Couldn't take time off work
X	X	F5_11	Why no phy, occup, speech therapy - Other
			Why no phy, occup, speech therapy - Refused/won't go for the
X	X	F5_12	service
X	X	F5_13	Why no phy, occup, speech therapy - Not referred for it
X	X	F5_14	Why no phy, occup, speech therapy - Unable to schedule it
			Why no phy, occup, speech therapy - Doesn't meet the program
X	X	F5_15	requirements
X	X	F5_16	Why no phy, occup, speech therapy - Didn't ask for/ apply for it
X	X	F5_17	Why no phy, occup, speech therapy - School would not help/pay
			Why no phy, occup, speech therapy - Other health issues have
X	X	F5_18	higher priority
			Why no phy, occup, speech therapy - Provider thinks no longer
X	X	F5_2	needed
X	X	F5_3	Why no phy, occup, speech therapy - Too expensive/ can't afford
			Why no phy, occup, speech therapy - Insurance or Medicaid
X	X	F5_4	doesn't cover
. -		T	Why no phy, occup, speech therapy - Don't know where/how to get
X	X	F5_5	it

PUF	RUF Variable	LABEL
	**	
X	X F5_6	Why no phy, occup, speech therapy - On waiting list
X	X F5_7	Why no phy, occup, speech therapy - Service not available
X	X F5_8	Why no phy, occup, speech therapy - Don't like provider
X	X F5_9	Why no phy, occup, speech therapy - Transportation problems
X	X F60	Received other services
	X F61_1	What other services were received - Doctors visits
	X F61_10	What other services were received - Other therapy services
	X F61_11	What other services were received - Other
	V F(1 12	What other services were received - Special medical tests/
	X F61_13	procedures
	W Ect 14	What other services were received - Multispecialty collaborative
	X F61_14	(wrap around) services
	X F61_15	What other services were received - Dental care
	X F61_16	What other services were received - Job training
	X F61_17	What other services were received - Transportation
	X F61_18	What other services were received - Tutoring
	X F61_2	What other services were received - Hospital care
	X F61_3	What other services were received - Mental health counseling
	V E(1 /	What other services were received - Personal care attendant or
	X F61_4 X F61_5	home care service
	X F61_5 X F61_6	What other services were received - Special education What other services were received - Skilled nursing services
	X F61_7	What other services were received - Skined hursing services What other services were received - Social work services
	A 101_/	
	X F61_8	What other services were received - Training in self-care or home- making
	X F61_9	What other services were received - Training in social skills
	X F62_1	Who paid for other services- Sample Member
	A 102_1	Who paid for other services- Foundation, church, other charitable
	X F62_10	agency
	X F62_11	Who paid for other services- SSI
	X F62_12	Who paid for other services- Welfare
	X F62_13	Who paid for other services- State/ county
		Who paid for other services- Family member living in same
X	X F62_2	household
	_	Who paid for other services- Family member not living in same
	X F62_3	household
X	X F62_4	Who paid for other services- Insurance/ Medicaid
	X F62_5	Who paid for other services- School system/ special education
	X F62_6	Who paid for other services- Title 5 program
	X F62_7	Who paid for other services- Early intervention
		•

PIIF	RIIE	' Variable	LABEL
101	KUI	v at table	LADEL
	X	F62_8	Who paid for other services- No one/ free
		F62_9	Who paid for other services- Other
		F63_AMT	Out pckt exp- other services - amount
		F63_AN	Out pckt exp- other services - period
X		F64	Any services NAME needs/ not receive
X	X	F65_1	What services is NAME not receiving - Doctors visits
	X	F65_10	What services is NAME not receiving - Other
			What services is NAME not receiving - Special medical tests/
X	X	F65_13	procedures
			What services is NAME not receiving - Multi-specialty
	X	F65_14	collaborative (wrap around) services
X	X	F65_15	What services is NAME not receiving - Dental care
X	X	F65_16	What services is NAME not receiving - Job training
	X	F65_17	What services is NAME not receiving - Transportation
X	X	F65_18	What services is NAME not receiving - Tutoring
	X	F65_19	What services is NAME not receiving - Childcare
	X	F65_2	What services is NAME not receiving - Hospital care
			What services is NAME not receiving -
	X	F65_20	Residential/group/supervised living
	X	F65_21	What services is NAME not receiving - Vision/eye care services
	X	F65_22	What services is NAME not receiving - Speech therapy
			What services is NAME not receiving - Financial assistance (SSI
X	X	F65_23	or other benefits returned)
	X	F65_24	What services is NAME not receiving - Recreation services
	X	F65_25	What services is NAME not receiving - Insurance
			What services is NAME not receiving - Equipment, supplies to
	X	F65_26	care for Sample Member
			What services is NAME not receiving - Maintenance, repair
		F65_27	(wheelchair, etc)
	X	F65_28	What services is NAME not receiving - Medications
X	X	F65_3	What services is NAME not receiving - Mental health counseling
X	X	F65_4	What services is NAME not receiving - Special education
	X	F65_5	What services is NAME not receiving - Visiting nurse services
X	X	F65_6	What services is NAME not receiving - Social work services
			What services is NAME not receiving - Training in self-care or
X	X	F65_7	homemaking
X	X	F65_8	What services is NAME not receiving - Training in social skills
X	X	F65_9	What services is NAME not receiving - Other therapy services

PUF	RUF	Variable	LABEL
	X	F66_1	Why isn't NAME receiving these services - Didn't need the service
			Why isn't NAME receiving these services - Couldn't take time off
	X	F66_10	work
	X	F66_11	Why isn't NAME receiving these services - Other
			Why isn't NAME receiving these services - Refused/won't go for
X	X	F66_12	the service
	X	F66_13	Why isn't NAME receiving these services - Not referred for it
	X	F66_14	Why isn't NAME receiving these services - Unable to schedule it
			Why isn't NAME receiving these services - Doesn't meet the
X	X	F66_15	program requirements
			Why isn't NAME receiving these services - Didn't ask for/ apply
	X	F66_16	for it
			Why isn't NAME receiving these services - Unwilling to seek mh
	X	F66_17	care
			Why isn't NAME receiving these services - Provider thinks no
X	X	F66_2	longer needed
			Why isn't NAME receiving these services - Too expensive/ can't
X	X	F66_3	afford
X 7	37	Tree 1	Why isn't NAME receiving these services - Insurance or Medicaid
X	X	F66_4	doesn't cover
v	v	E((5	Why isn't NAME receiving these services - Don't know where/hov
X		F66_5	to get it
X X	X	F66_6	Why isn't NAME receiving these services - On waiting list
Λ		F66_7 F66_8	Why isn't NAME receiving these services - Service not available Why isn't NAME receiving these services - Don't like provider
	Λ	100_6	Why isn't NAME receiving these services - Bon't like provider Why isn't NAME receiving these services - Transportation
X	Y	F66_9	problems
Λ		F67A_1_AMT	Out pckt exp- medications - amount
	X	F67A_1_AN	Out pekt exp- medications -period
	X	F67B_1_AMT	Out pekt exp- special diet - amount
		F67B_1_AN	Out pckt exp- special diet - period
	X	F67C_1_AMT	Out pekt exp- medical supplies - amount
	X	F67C_1_AN	Out pckt exp- medical supplies - period
	X	F67D_1_AMT	Out pckt exp- special clothing - amount
	X	F67D_1_AN	Out pckt exp- special clothing - period
	X	F67F_1_AMT	Out pckt exp-higher hlth insur premiums - amount
	X	F67F_1_AN	Out pckt exp-higher hlth insur premiums - period
	X	F67G_1_AMT	Out pckt exp- extra phone bill charges - amount

PUF	RUI	Variable	LABEL
	v	E67C 1 AN	Out pakt avp. ovtra phone bill charges paried
	X X	F67G_1_AN F67H_1_AMT	Out pckt exp- extra phone bill charges - period Out pckt exp- extra utility bill charges - amount
	X	F67H_1_AN	Out pckt exp- extra utility bill charges - period
			Out pckt exp- extra utility bill charges - period Out pckt exp- other special needs items - amount
	X	F67I_1_AN	Out pckt exp- other special needs items- period
	X	F67a	Have out pckt exp- medications
	X	F67b	Have out pckt exp- medications Have out pckt exp- special diet
	X		Have out pckt exp- special diet Have out pckt exp- medical supplies
	X		Have out pckt exp- medical supplies Have out pckt exp- special clothing
		F67f	Have out pckt exp- special clouding Have out pckt exp-higher hlth insur premiums
		F67g	Have out pckt exp-inglier mut itsul premiums Have out pckt exp- extra phone bill charges
	X	•	Have out pckt exp- extra phone bill charges
X	X		Buy any out pckt exp- other special needs items
1	X	F67i_1	Out pckt exp- other special needs items - first other item
	X		Out pckt exp- other special needs items - second other item
	X	F67i_3	Out pckt exp- other special needs items - third other item
	X	F67i_4	Out pckt exp- other special needs items - fourth other item
	X		Out pckt exp- other special needs items - fifth other item
X		F68	Other items NAME needs/not reving
X		F69_1	What items does NAME need/not receive - education services
11		100_1	What items does NAME need/not receive - incontinence care
	X	F69_10	products
	X	F69_11	What items does NAME need/not receive - care products
	X		What items does NAME need/not receive - medical care
X	X	_	What items does NAME need/not receive - medical devices
X	X	F69_3	What items does NAME need/not receive - eyeglasses
	X		What items does NAME need/not receive - hearing aid
	X	F69_5	What items does NAME need/not receive - hospital bed
	X	F69_6	What items does NAME need/not receive - other
X	X	F69_7	What items does NAME need/not receive - medications
X	X	F69_8	What items does NAME need/not receive - dental care
X	X	F69_9	What items does NAME need/not receive - additional therapy
	X	F6_1	Who paid for phy, occup, speech therapy - Sample Member
			Who paid for phy, occup, speech therapy - Foundation, church,
	X	F6_10	other charitable agency
	X	F6_11	Who paid for phy, occup, speech therapy - SSI
	X	F6_12	Who paid for phy, occup, speech therapy - Welfare
	X	F6_13	Who paid for phy, occup, speech therapy - State/ County
			Who paid for phy, occup, speech therapy - Family member living
X	X	F6_2	in same household

PUF	RUF	Variable	LABEL
			Who maid for the cooper speech thought. Family manch or not
	v	F6_3	Who paid for phy, occup, speech therapy - Family member not living in same household
X		F6_4	Who paid for phy, occup, speech therapy - Insurance/ Medicaid
Λ	Λ	10_4	Who paid for phy, occup, speech therapy - Insurance/ Medicaid Who paid for phy, occup, speech therapy - School system/ special
X	v	F6_5	education
Λ		F6_6	Who paid for phy, occup, speech therapy - Title 5 program
	X	F6_7	Who paid for phy, occup, speech therapy - True 3 program Who paid for phy, occup, speech therapy - Early intervention
		F6_8	Who paid for phy, occup, speech therapy - No one/ free
		F6_9	Who paid for phy, occup, speech therapy - Other Who paid for phy, occup, speech therapy - Other
X	X	F70	Name has durable med equipment/devices
Λ	X	F71_AMT	Out pckt exp- durable med eqpmnt/devices - amount
	X	F71_AN1	Out pckt exp- durable med eqpmnt/devices - amount Out pckt exp- durable med eqpmnt/devices - period
	X	F72_AMT	Total paid-durable med eqpment/devices - amount
	X		
	X	F72_AN F7_AMT	Total paid-durable med eqpment/devices - period Out pckt exps- phy, occup, speech therapy - amount
	X	F7_AMT	Out pckt exps- phy, occup, speech therapy- amount Out pckt exps- phy, occup, speech therapy- period
	X	F/_AIN F8	
X	X	F9	CHECK: Age <18, 18+
Λ	X	FEDAMT00	Receive respiratory therapy 00-Federal Assistance Amount
	X	FEDAMT96	96-Federal Assistance Amount
	X	FEDAMT90 FEDPMT00	
	X	FEDPMT96	00-Federal Money Amount
X	X	FNL	96-Federal Money Amount Final Status Code
Λ	X	G1	CHECK: RTYPE
X	X	G10a	Was harder to care for
X		G10a G10b	
X	X X	G10c	Does things that bother you
X	X	G10d	Giving up more than you expected Angry with NAME
Λ			CHECK AGE <17, +17
		G11	
X	X X	G12 G13	CHECK: NAME living at school Name contributes to finances
Λ	X	G13	How much did NAME contribute last month
X	X	G14 G15	b/f 25, will NAME be independent
X			Name is still in school
X X	X X	G16_I G16_J	Name is still a minor
X		G16_K	Name lacks basic life skills
X	X	G16_K G16_L	NAME is unable to live independently
X	X	G16_a	Name can't afford to live independently
X		G16_b	Name needs help b/c of medical condition
X	X	G16_c	Name is needed to care for other family

PUF	RUF	Variable	LABEL
X		G16_d	Not comfortable w/ NAME living independently
X	X	G16_e	Name not comfortable living independently
X	X	G16_f	Name is trying to save money
X	X	G16_g	Name prefers living with family
X	X	G16_h	Name lives at home for other reason
	X	G17	Spouse/partner check
X	X	G18	More/less conflicts with spouse/partner
	X	G19	# of children check
X	X	G2	Worried about food running out
X	X	G20	Children have more or less fights
X		G21_a	Moved in with someone to save \$
X	X	G21_b	Added boarder/roommate
X	X	G21_c	Cut back on things for NAME's care
X	X	G21_d	Reduced household purchases/exp
X	X	G21_e	Go into/increase debt for NAME's care
X	X	G22_a	Get a job/2nd job/better paying job
X	X	G22_b	Enter job training/ go back to school
X	X	G23	Lived in emergency/ dv shelter
X	X	G24	Been homeless
X	X	G25_1	Received help from a food pantry
X	X	G25_2	Received help from a soup kitchen
X	X	G25_3	Received help from a community center
X	X	G25_4	Received help from a church
X	X	G25_5	Received help from another source
	X	G25_6	Received help from family
			Received help from a charitable organization/ Red Cross/ Salvation
	X	G25_7	Army
	X	G25_8	Received help from a school
X	X	G26	Current standard of living
X	X	G27	Standard of living compared to 1996
	X	G27_test	CHECK: Age
	X	G28	CHECK: living situation
X	X	G29	NAME worried about food running out
X	X	G3	Food actually ran out
X	X	G30	Food actually ran out
X	X	G31	NAME decreased food b/c lack of money
X	X	G32	How often cut food b/c lack of money
X	X	G33	Not enough \$ for mortgage, rent, util
X	X	G34	Worried about food running out
X	X	G35_a	Moved in w/ someone to save \$

PUF	RUF	Variable	LABEL
X	X	G35_b	Added boarder/roommate
X	X	-	Cut back on things for NAME's care
X		G35_d	Reduced household purchases/exp
X	X	G35_e	Go into/increase debt for NAME's care
X	X	G36	Lived in emergency/ dv shelter
X	X	G37	Been homeless
X	X	G38_1	Received help from a food pantry
X	X	G38_2	Received help from a soup kitchen
X	X	G38_3	Received help from a community center
X	X	G38_4	Received help from a church
X	X	G38_5	Received help from another source
X	X	G38_6	Received help from family
			Received help from a charitable organization/ Red Cross/ Salvation
X	X	G38_7	Army
X	X	G39	Current standard of living
X	X	G4	Adults decrease food b/c lack of money
X	X	G40	Standard of living compared to 1996
X	X	G41	Rcvd financial assistance -outside household
	X	G42	How much financial assistance
	X	G43_test	Check: Rtype
X	X	G43a	Trouble sleeping
X	X	G43b	Trouble concentrating
X	X	G43c	Trouble getting along with peers
	X	G44	Spouse check
X	X	G45	More/less conflicts with spouse/partner
X	X	G46	# of children check
X	X	G47	Children have more or less fights
X	X	G48	Engage in social activities
X	X	G49	Telephone family and/or friends
X	X	G5	How often cut food b/c lack of money
X	X	G50	Attend enrichment event
X	X	G51	Number of days left home in last two weeks
X	X	G52	Satisfaction with social activities
X	X	G53	Been sad or depressed
X	X	G54	Been arrested
X	X	G6	Not enough \$ for mortgage, rent, util
X	X	G7	How often not \$ for mortgage, rent, util
	X	G8	CHECK: AGE<3, 3-16, 17+
X	X	G9a	Trouble concentrating
X	X	G9b	Trouble getting along with peers

PUF	RUF	Variable	LABEL
X		G9c	Unhappy/sad/depressed
X	X	G9d	Trouble sleeping
X	X	G9e	Lies or cheats
X	X	G9f	Did poorly at school work
X	X	G9g	Trouble with police/courts
	X	GKC51	UNV-GOLDBERG/KELLY CODE FROM SSR SELECTE
		GKC91	UNV-GOLDBERG/KELLY CODE FROM SSR SELECTE
	X	H1	CHECK: RTYPE
		H10	Confirm time with no SSI
		H11_1	Why was SSI lost - Got a job
	X	H11_10	Why was SSI lost - Custody transfer to another parent
	X	H11_11	Why was SSI lost - Problem with paperwork/administrative error
		H11_12	Why was SSI lost - Did not want to renew/followup/reapply
	X	H11_13	Why was SSI lost - NAME moved to hospital/institution/school Why was SSI lost - Welfare reform/new law/change in rules
	X X	H11_14 H11_15	•
X		H11_13	Why was SSI lost - Not eligible (unspecified)
Λ		H11_3	Why was SSI lost - Income too high Why was SSI lost - Assets too high
X		H11_4	Why was SSI lost - Assets too high Why was SSI lost - Determined medically ineligible
Λ		H11_5	Why was SSI lost - Determined inedicarly mengione Why was SSI lost - Did not follow program rules
	X	H11_6	Why was SSI lost - Did not follow program rules Why was SSI lost- Married/remarried
		H11_7	Why was SSI lost - Moved in with another family/person
		H11_8	Why was SSI lost - Other
	71	1111_0	Why was SSI lost - SSA overpaid and stopped payments to
	X	H11_9	compensate
		H12	Did you appeal loss of SSI
		H13_1	Why didn't you appeal loss of SSI
		H13_10	Why didn't you appeal loss of SSI
		H13 11	Why didn't you appeal loss of SSI
		H13_12	Why didn't you appeal loss of SSI
		H13_2	Why didn't you appeal loss of SSI
		H13_3	Why didn't you appeal loss of SSI
	X	H13_4	Why didn't you appeal loss of SSI
	X	H13_5	Why didn't you appeal loss of SSI
	X	H13_6	Why didn't you appeal loss of SSI
	X	H13_7	Why didn't you appeal loss of SSI
	X	H13_8	Why didn't you appeal loss of SSI
	X	H13_9	Why didn't you appeal loss of SSI
	X	H14	Consulted lawyer/legal aid in making decision not to appeal
	X	H15	Consulted lawyer in making decision to appeal

PUF	RIIE V	Variable	LABEL
TUF	KUF	v at table	LADEL
	X I	H16	Any changes when lost SSI
	X I	H16_1	Household changes to cope with loss of SSI benefits - Response 1
	X I	H16_2	Household changes to cope with loss of SSI benefits - Response 2
	X I	H16_3	Household changes to cope with loss of SSI benefits - Response 3
	X I	H16_4	Household changes to cope with loss of SSI benefits - Response 4
		H16_5	Household changes to cope with loss of SSI benefits - Response 5
		H17	Lose Medicaid when SSI was lost
		H18	Lose Medicaid for > or < 3 months
	XI		Received SSI for NAME
		H2	CHECK: AGE <17, 17+
		H20	CHECK: H19 agree with preload
	XI		Confirm SSI benefits
	XI		Receive SSI benefit last month
	XI		Amount of SSI benefit last month
	XI		CHECK: AGE <18, 18+
X	XI	H25	Receiving SSI at 18th birthday
X	ΧI	H26	Benefits redetermined at 18th b-day
X	XI	H27	Final decision about NAME's eligibility
X	XI	H28	What was final eligibility decision
X	XI	H29	Final decision pending or on appeal
	XI	H3	Received SSI for NAME
	XI	H30_1	Why was SSI lost - Income too high
	XI	H30_10	Why was SSI lost - In jail
			Why was SSI lost - SSA overpaid and stopped payments to
	XI	H30_11	compensate
	XI	H30_12	Why was SSI lost - Turned 18
	XI	H30_2	Why was SSI lost - Assets too high
	ΧI	H30_3	Why was SSI lost - Determined medically ineligible
			Why was SSI lost - Determined able to work/engage in substantial
	ΧI	H30_4	gainful activity
	ΧI	H30_5	Why was SSI lost - Did not follow program rules
	ΧI	H30_6	Why was SSI lost - NAME married/remarried
	ΧI	H30_7	Why was SSI lost - NAME not in school/job training
	ΧI	H30_8	Why was SSI lost - Other
	X	H31_1	Why was SSI lost - Income too high

PUF	RUF	Variable	LABEL
	X	H31_10	Why was SSI lost - In jail
	**	*****	Why was SSI lost - SSA overpaid and stopped payments to
		H31_11	compensate
	X	H31_12	Why was SSI lost - Turned 18
	X	H31_2	Why was SSI lost - Assets too high
	X	H31_3	Why was SSI lost - Determined medically ineligible
			Why was SSI lost - Determined able to work/engage in substantial
	X	H31_4	gainful activity
		H31_5	Why was SSI lost - Did not follow program rules
		H31_6	Why was SSI lost - NAME married/remarried
	X	H31_7	Why was SSI lost - NAME not in school/job training
		H31_8	Why was SSI lost - Other
X	X	H32	Time when no SSI benefit post 1996
	X	H33	CHECK: H32 agree with preload
	X	H34	Confirm time with no SSI
X	X	H35_1	Why was SSI lost - Parent's income too high
	X	H35_10	Why was SSI lost - In jail
			Why was SSI lost - SSA overpaid and stopped payments to
	X	H35_11	compensate
	X	H35_12	Why was SSI lost - Turned 18
	X	H35_2	Why was SSI lost - Parent's assets too high
	X	H35_3	Why was SSI lost - NAME's income too high
	X	H35_4	Why was SSI lost - Name's assets too high
X	X	H35_5	Why was SSI lost - NAME determined medically ineligible
	X	H35_6	Why was SSI lost - Did not follow program rules
	X	H35_7	Why was SSI lost - Married/remarried
	X	H35_8	Why was SSI lost - Moved in with another family/person
	X	H35_9	Why was SSI lost - Other
X	X	H36	Did you appeal loss of SSI
X	X	H37_1	Why didn't you appeal loss of SSI - Did not want to
X	X	H37_10	Why didn't you appeal loss of SSI - Could not take time off work
			Why didn't you appeal loss of SSI - Still receiving
X	X	H37_11	benefits/regained benefits
			Why didn't you appeal loss of SSI - NAME not living with
X	X	H37_12	respondent
X	X	H37_2	Why didn't you appeal loss of SSI - Did not know how
X	X	H37_3	Why didn't you appeal loss of SSI - Did not know could appeal
X	X	H37_4	Why didn't you appeal loss of SSI - Could not afford lawyer
X	X	H37_5	Why didn't you appeal loss of SSI - Did not have a strong case

PUF	RUF	Variable	LABEL
			Why didn't you appeal loss of CCI. Woming we would have to now
X	Y	H37_6	Why didn't you appeal loss of SSI - Worried we would have to pay SSA
X		H37_7	Why didn't you appeal loss of SSI - Thought we would not win
X		H37_8	Why didn't you appeal loss of SSI - Thought we would not will Why didn't you appeal loss of SSI - Other
71	71	1137_0	Why didn't you appeal loss of SSI - Unable to get materials in on
X	X	H37_9	time
71		H38	Consult lawyer/legal aid for no appeal
			Use lawyer/legal aid for appeal
		H4	CHECK: H3 agree with preload
X		H40	Any changes when lost SSI
71	71	1140	7 my changes when lost obt
	X	H40_1	Household changes to cope with loss of SSI benefits - Response 1
	X	H40_2	Household changes to cope with loss of SSI benefits - Response 2
	X	H40_3	Household changes to cope with loss of SSI benefits - Response 3
	X	H40_4	Household changes to cope with loss of SSI benefits - Response 4
	X	H40_5	Household changes to cope with loss of SSI benefits - Response 5
X	X	H41	Lose Medicaid when SSI was lost
X	X	H42	Lose Medicaid for $> $ or $< 3 $ months
	X	H43	CHECK H22: reving SSI last month
	X	H43b	CHECK: Age
X	X	H44	Heard of or discussed work incentives
X	X	H46a	Heard of PASS
X	X	H46b	Heard of IDA
X	X	H46c	Heard of general earned income exclusion
X	X	H46d	Heard of student earned income exclusion
X	X	H46e	Heard of exclusion for PESS
X	X	H46f	Heard of exclusion for IRWE/BWE
X	X	H46g	Heard of continuing Medicaid eligibility
	X	H47	Used these work incentives
		H48_1	Used PASS
		H48_2	Used IDA
		H48_3	Used general earned income exclusion
		H48_4	Used student earned income exclusion
		H48_5	Used PESS
		H48_6	Used IWRE or BWE
	X	H48_7	Used continued eligibility for Medicaid

PUF	RUF	' Variable	LABEL
	X	H49	CHECK: is IDA checked yes
	X	H5	Confirm SSI benefits
		H50	IDA account- how much per month
		H51_1	Plans for IDA money - school expenses
		H51_2	Plans for IDA money - purchase house
		H51_3	Plans for IDA money - start a business
		H51_4	Plans for IDA money - other
	X	H52	CHECK: is PASS checked yes
	X	H53	Amount approved for PASS
X		H54	How is SSI benefit spent
X	X	H55	Does SSI benefit cover disability expenses
X	X	H56	Was benefit adequate
		H56_1	Reason benefit was not adequate - response 1
	X	H56_2	Reason benefit was not adequate - response 2
		H56_3	Reason benefit was not adequate - response 3
		H56_4	Reason benefit was not adequate - response 4
	X	H56_5	Reason benefit was not adequate - response 5
	X	H6	Receive SSI benefit last month
	X	H7	Amount of SSI benefit last month
	X	H8	Time when no SSI benefit post 1996
		H9	CHECK: H8 agree with preload
		HUN_00	00-Housed Under Number 96-Housed Under Number
	X X	HUN_96 I1	CHECK: RTYPE
	X	I10	Parent1- type of employer
	X	I100	Name- last year's net earnings
	X	I100	Name- additional earnings last year
		I101 I102	Name- estimate of additional earnings
		I102 I103 1	How does NAME get to work - car
		I103_1 I103_2	How does NAME get to work - car How does NAME get to work - work at home
	X	I103_2 I103_3	How does NAME get to work - work at nome How does NAME get to work - public transportation
	71	1103_3	Tiow does 147 dvil get to work - public transportation
	X	I103_4	How does NAME get to work - specialized transportation service
	X	I103_5	How does NAME get to work - taxi
	X	I103_6	How does NAME get to work - walk
	X	I103_7	How does NAME get to work - scooter/wheelchair
	X	I103_8	How does NAME get to work - other
	X	I103_9	How does NAME get to work - bicycle
X	X	I104	Dependibility of NAME's transportation
	X	I105	CHECK: NAME's spouse in household

PUF R	UF Variable	LABEL
	X I106	Name's SP- employed
	X I107	Name's SP- actively looking for work
	X I108	Name's SP- ever worked
	X I109_MON	Name's SP- last worked month
	X I109_YR	Name's SP- last worked year
	X III	Parent1- kind of business
	X I110	Name's SP- main reason for not working
	X I111	Name's SP- employer/self-employed/both
	X I112	Name's SP- multiple employers
	X I113	Name's SP- how many employers
	X I114	Name's SP- type of job
	X I115	Name's SP- type of employer
	X I116	Name's SP- kind of business
	X I117	Name's SP- occupation
	X I118_NUM	Name's SP- how long with this employer - number
	X II18_PER	Name's SP- how long with this employer - period
	X I119	Name's SP- hrs/week for main job
	X I12	Parent1- occupation
	X I120	Name's SP- total hrs/week for all jobs
	X I121 X I122 AMT	Name's SP- paid by the hour
	X I122_AMT	Name's SP- regular hourly pay (w/ tips)
	X I123_AMT X I123_PER	Name's SP-salary (b/f taxes/deductions)
		Name's SP-salary (b/f taxes/deductions)
	X I124 X I125	Name's SP (self emp) - kind of business
	X I125 X I126_NUM	Name's SP (self emp)- occupation Name's SP- how long self employed - number
	X I126_PER	Name's SP- how long self employed - number
	X 1120_1 EK X 1127	Name's SP (self emp)- hrs/week
	X 1127 X 1128	Name's SP (self emp)- tot. income
	X 1128 X 1129	Name's SP- last year's net earnings
	X I130	Name's SP- additional earnings last year
	X I130	Name's SP- est of additional earnings
	X I13_NUM	Parent1- how long with this employer - number
	X II3_PER	Parent1- how long with this employer - period
	X I14_NUM	Parent1- hrs/week for main job
	X I15_NUM	Parent1- total hrs/week for all jobs
	X I16	Parent1- work between 6AM and 6PM
	X I17	Parent1- paid by the hour
	X I18_AMT	Parent1- regular hourly pay (w/ tips)
	X I19_AMT	Parent1- salary (b/f taxes and deductions) - amount
	_	• •

PUF	RUF	Variable	LABEL
	37	IIO DED	
	X X	I19_PER	Parent 1 - salary (b/f taxes and deductions) -period
		I2	Parent 1 (colf arm) kind of hydraes
	X	I20	Parent 1 (self emp) - kind of business
		I21	Parent 1 (self emp)- occupation
	X	I22_NUM	Parent 1 how long self employed - number
	X X	I22_PER I23_NUM	Parent1- how long self employed - period Parent1 (self emp)- hrs/week
		123_NOM 124	•
	X	I25_AMT	Parent1 (self emp)- work bet 6AM and 6PM Parent1 (self emp)- tot income last mnth
		I26_AMT	Parent1- last year's total earnings
X		120_AWT1 127	Parent1- additional earnings last year
Λ	X	I28_AMT	Parent1- estimate of additional earnings
X		129_a	Not taken job in order to care for NAME
X		I29_b	Quit working to care for NAME
X		I29_c	Changed jobs to care for NAME
X		I29_d	Changed work hours to care for NAME
X		I29_e	Turned down better job to care for NAME
X	X	I3	Parent1- actively looking for work
21	X	130	CHECK: last worked prior to 1996
X		I31	Parent1- employed in 1996
X		I32_1	Parent1- main reason not working 1996 - taking care of NAME
X		I32_10	Parent1- main reason not working 1996 - pregnancy/childbirth
		I32_11	Parent1- main reason not working 1996 - on layoff
		- I32_12	Parent1- main reason not working 1996 - job ended
	X	I32_13	Parent1- main reason not working 1996 - don't want to lose SSI
	X	I32_14	Parent1- main reason not working 1996 - other
		I32_15	Parent1- main reason not working 1996 - new job to begin soon
	X	I32_16	Parent1- main reason not working 1996 - transportation problems
	X	I32_17	Parent1- main reason not working 1996 - fired
			Parent1- main reason not working 1996 - cannot get along with
	X	I32_18	others
			Parent1- main reason not working 1996 - cannot hold down/keep
	X	I32_19	job (lacks education/cannot r
X	X	I32_2	Parent1- main reason not working 1996 - ill or disabled
			Parent1- main reason not working 1996 - no/ cannot afford
	X	I32_20	childcare
	X	I32_21	Parent1- main reason not working 1996 - too young to work
			Parent1- main reason not working 1996 - receiving public
	X	I32_22	assistance

PUF	RUF	Variable	LABEL
	v	122 22	Parent1- main reason not working 1996 - recently moved/ finding
	Λ	I32_23	place to live
	v	122 24	Parent1- main reason not working 1996 - language
		I32_24	barrier/immigration issue Parent1- main reason not working 1996 - incarcerated
		I32_25 I32_3	Parent1- main reason not working 1996 - retired
X		I32_4	Parent1- main reason not working 1996 - taking care of child
Λ	Λ	132_4	Parent1- main reason not working 1996 - taking care of home/other
X	v	I32_5	family
X		I32_6	Parent1- main reason not working 1996 - attending school
X		I32_7	Parent1- main reason not working 1996 - cannot not find work
Λ	Λ	132_/	Farenti- main reason not working 1990 - Cannot not find work
	X	I32_8	Parent1- main reason not working 1996 - suitable job not available
X	X	I32_9	Parent1- main reason not working 1996 - not interested in working
	X	I33	CHECK: spouse/partner in household
	X	I34	Parent2- employed
X	X	I35	Parent2- actively looking for work
X	X	I36	Parent2- ever worked
	X	I37_MON	Parent2- last worked month
	X	I37_YR	Parent2- last worked year
X	X	I38	Parent2- main reason for not working
X	X	I39	Parent2- employer/self-employed/both
X	X	I4	Parent1- ever worked
X	X	I40	Parent2- multiple employers
	X	I41_NUM	Parent2- how many employers
	X	I42	Parent2- type of employer
	X	I43	Parent2- kind of business
	X	I44	Parent2- occupation
	X	I45_NUM	Parent2- how long with this employer - number
	X	I45_PER	Parent2- how long with this employer - period
	X	I46_NUM	Parent2- hrs/week for main job
	X	I47_NUM	Parent2- total hrs/week for all jobs
X	X	I48	Parent2- work between 6AM and 6PM
X	X	I49	Parent2- paid by the hour
	X	I50_AMT	Parent2- regular hourly pay (w/ tips)
	X	I51_AMT	Parent2- salary (b/f taxes and deductions) - amount
	X	I51_PER	Parent2- salary (b/f taxes and deductions) - period
	X	I52	Parent2 (self emp)- kind of business
	X	I53	Parent2 (self emp)- occupation

PUF	RUF	Variable	LABEL
	X	I54_NUM	Parent2- how long self employed
		I54_PER	Parent2- how long self employed
		I55_NUM	Parent2 (self emp)- hrs/week
		I56	Parent2 (self emp)- work bet 6AM and 6PM
		I57_AMT	Parent2 (self emp)- tot income last mnth
		I57_AMT I58_AMT	Parent2- last year's total earnings
X		I59_AW1	Parent2- additional earnings last year
71		I5_MON	Parent1- last worked month
		I5_YR	Parent1- last worked year
X		I6	Parent1- main reason for not working
71		I60_AMT	Parent2- estimate of additional earnings
	X	I61a	CHECK: last worked prior to 1996
X		I61b	Living with current spouse or Partner in 1996
X		I62	Parent2- employed in 1996
X		I63_1	Parent1- main reason not working 1996 - taking care of NAME
71		I63_10	Parent1- main reason not working 1996 - pregnancy/childbirth
		I63_11	Parent1- main reason not working 1996 - on layoff
		I63_12	Parent1- main reason not working 1996 - job ended
		I63_13	Parent1- main reason not working 1996 - don't want to lose SSI
		I63_14	Parent1- main reason not working 1996 - other
		I63_15	Parent1- main reason not working 1996 - new job to begin soon
		I63_16	Parent1- main reason not working 1996 - transportation problems
X	X	I63_2	Parent1- main reason not working 1996 - ill or disabled
21	71	103_2	Parent1- main reason not working 1996 - no/ cannot afford
	X	I63_20	childcare
		I63_21	Parent1- main reason not working 1996 - too young to work
	Λ	103_21	Parent1- main reason not working 1996 - recently moved/ finding
	X	I63_23	place to live
	Λ	103_23	Parent1- main reason not working 1996 - language
	Y	I63_24	barrier/immigration issue
		I63_25	Parent1- main reason not working 1996 - incarcerated
X		I63_3	Parent1- main reason not working 1996 - retired
Λ		I63_4	Parent1- main reason not working 1996 - taking care of child
	Λ	103_4	
X	\mathbf{v}	163 5	Parent1- main reason not working 1996 - taking care of home/other family
Λ		I63_5 I63_6	Parent1- main reason not working 1996 - attending school
		I63_7	Parent1- main reason not working 1996 - cannot not find work
	Λ	103_/	1 architi- main reason not working 1990 - Camot not find work
	X	I63_8	Parent1- main reason not working 1996 - suitable job not available

PUF	RUF	Variable	LABEL
	X	I63_9	Parent1- main reason not working 1996 - not interested in working
	X	I64	CHECK: AGE<18,18+
	X	I65	Name- employed
X	X	I66	Name- actively looking for work
X	X	I67	Name- ever worked
	X	I68_MON	Name- last worked month
	X	I68_YR	Name- last worked year
	X	I69	Name- main reason for not working
X	X	I7	Parent1- employer/self-employed/both
X	X	I70	Name- ever lost job b/c of disability
X		I71	Name-disability entirely prevent working
X		I72	Name- could work with accomodations
X	X	I73	Name- work depends on accomodations
X		I74_a	Reason not working - lose SSI/income
X		I74_b	Reason not working - would lose housing
X	X	I74_c	Reason not working - would lose health insurance/Medicaid
			Reason not working - fam/friends would discourage NAME from
X		I74_d	working
X		I74_e	Reason not working - no employer would hire
X		I74_f	Reason not working - job info not available
X		I74_g	Reason not working - training not adequate
X		I74_h	Reason not working - lack of transportation
X		I74_i	Reason not working - other reason
X		I74_j	Reason not working - not healthy enough to work
X		I74_k	Reason not working - doesn't have enough skills/edu. to work
X		I74_1	Reason not working - going to school
X		I74_m	Reason not working - child care
X		I74_n	Reason not working - mental/emotional obstacles to work
X	X	I74_o	Reason not working - pregnancy/recent childbirth
			Reason not working - currently receiving/on waitlist for job
X		I74_p	training
X		175	Disablity limits kind/amt of work
X	X	I76	Needs spec accomodations to work
		I77	CHECK: will start new job in <30 days
X		178	Name- job search in next 6 months
X	X	I79	Name- unpaid volunteer work
X		I8	Parent1- multiple employers
	X	I80_DAY	Name- # days in unpaid volunteer work
	X	I80_PER	Name- # days in unpaid volunteer work

PUF	RUF	Variable	LABEL
X		I81	Name- employer/self-employed/both
X	X	182	Name- multiple employers
		I83_NUM	Name- how many employers
	X	I84	Name- type of job
X	X	185	How did NAME hear about the job
	X	I86	Name- type of employer
	X	I87	Name- kind of business
	X	I88	Name- occupation
	X	I89_NUM	Name- how long with this employer - number
	X	I89_PER	Name- how long with this employer - period
	X	I90	Name- hrs/week for main job
	X	I91	Name- total hrs/week for all jobs
		I92	Name- paid by the hour
	X	I93_AMT	Name- regular hourly pay (w/ tips)
	X	I94_AMT	Name- salary (b/f taxes and deductions)
	X	I94_PER	Name- salary (b/f taxes and deductions)
	X	I95	Name (self emp)- kind of business
	X	I96	Name (self emp)- occupation
	X	I97_NUM	Name- how long self employed - number
	X	I97_PER	Name- how long self employed - period
	X	I98	Name (self emp)- hrs/week
	X	I99	Name (self emp)- total income last month
	X	I9_NUM	Parent1- how many employers
	X	IMP1OHA1	UNV-PRIMARY DIAGNOSIS CODE FROM ALJ DECI
	X	INTVDT	Date of Interview
	X	IN_00	In 12/2000 SSA File
	X	IN_96	In 12/1996 SSA File
	X	IN_UNIV	In Children's Universe File
	X	I_BURIAL_EXPENSES	Imputation Flag For C_BURIAL_EXPENSES
	X	I_C25	Imputation Flag For C_C25
		I_C9	Imputation Flag For C_C9
	X	I_CAR1_DEBT	Imputation Flag For C_CAR1_DEBT
	X	I_CAR1_VALUE	Imputation Flag For C_CAR1_VALUE
	X	I_CAR2_DEBT	Imputation Flag For C_CAR2_DEBT
	X	I_CAR2_VALUE	Imputation Flag For C_CAR2_VALUE
	X	I_CASH	Imputation Flag For C_CASH
		I_CHECKING	Imputation Flag For C_CHECKING
	X	I_CHILD_SUPPORT	Imputation Flag For C_CHILD_SUPPORT
	X	I_CHILD_SUPPORT_AMT	Imputation Flag For C_CHILD_SUPPORT_AMT

PUF RUF Variable	LABEL
X I_F13	Imputation Flag For C_F13
X I_F18	Imputation Flag For C_F18
X I_F23	Imputation Flag For C_F23
X I_F30	Imputation Flag For C_F30
X I_F35	Imputation Flag For C_F35
X I_F42	Imputation Flag For C_F42
X I_F47	Imputation Flag For C_F47
X I_F53	Imputation Flag For C_F53
X I_F59	Imputation Flag For C_F59
X I_F63	Imputation Flag For C_F63
X I_F67A_AMT	Imputation Flag For C_F67A_AMT
X I_F67B_AMT	Imputation Flag For C_F67B_AMT
X I_F67C_AMT	Imputation flag for F_67C_AMT
X I_F67D_AMT	Imputation Flag For C_F67D_AMT
X I_F67F_AMT	Imputation Flag For C_F67F_AMT
X I_F67G_AMT	Imputation Flag For C_F67G_AMT
X I_F67H_AMT	Imputation Flag For C_F67H_AMT
X I_F67I_AMT	Imputation Flag For C_F67I_AMT
X I_F7	Imputation Flag For C_F7
X I_F71	Imputation Flag For C_F71
X I_F72	Imputation Flag For C_F72
X I_FOOD_STAMPS	Imputation Flag For C_FOOD_STAMPS
X I_FOOD_STAMPS_AMT	Imputation Flag For C_FOOD_STAMPS_AMT
X I_FOSTER_CARE	Imputation Flag For C_FOSTER_CARE
X I_FOSTER_CARE_AMT	Imputation Flag For C_FOSTER_CARE_AMT
X I_HEALTH_INSURANCE	Imputation Flag For C_HEALTH_INSURANCE
X I_HOUSEHOLD_INCOME	Imputation Flag For C_HOUSEHOLD_INCOME
X I_HOUSEHOLD_ITEMS	Imputation Flag For C_HOUSEHOLD_ITEMS
X I_INCOME_COMPARISON	N Imputation Flag For C_INCOME_COMPARISON
X I_OTHER_ASSET	Imputation Flag For C_OTHER_ASSET
X I_OTHER_SOURCES	Imputation Flag For C_OTHER_SOURCES
X I_OTHER_SOURCES_AM	T Imputation Flag For C_OTHER_SOURCES_AMT
X I_OTHER_SSA_BENEFITS	Imputation Flag For C_OTHER_SSA_BENEFITS

APPENDIX A:

PUF	RUF	Variable	LABEL
	X	I_OUT_PCKT_HLTH_EXP	Imputation Flag For C_OUT_PCKT_HLTH_EXP
	X	I_PARENT1_EARN_MONTH	Imputation Flag For C_PARENT1_EARN_MONTH
		I_PARENT1_EARN_YR	Imputation Flag For C_PARENT1_EARN_YR
		I_PARENT1_EMPLOYMENT	Imputation Flag For C_PARENT1_EMPLOYMENT
		I_PARENT1_HRS_WK	Imputation Flag For C_PARENT1_HRS_WK
	X	I_PARENT1_INCOME	Imputation Flag For C_PARENT1_INCOME
	X	I_PARENT1_RACE	Imputation Flag For C_PARENT1_RACE
	37	I DADENTE CADA MONTH	A CONTRACTOR OF THE CONTRACTOR
		I_PARENT2_EARN_MONTH	Imputation Flag For C_PARENT2_EARN_MONTH
	X	I_PARENT2_EARN_YR	Imputation Flag For C_PARENT2_EARN_YR
	X	I_PARENT2_EMPLOYMENT	Imputation Flag For C_PARENT2_EMPLOYMENT
	X	I_PARENT2_HRS_WK	Imputation Flag For C_PARENT2_HRS_WK
	X	I_PARENT2_INCOME	Imputation Flag For C_PARENT2_INCOME
	X	I_PARENT2_RACE	Imputation Flag For C_PARENT2_RACE
	X	I_PENSION_AND_ANNUITY	Imputation Flag For C_PENSION_AND_ANNUITY
	X	I_PENSION_ANNUITY_AMT	Imputation Flag For C_PENSION_ANNUITY_AMT
	X	I_SAVINGS	Imputation Flag For C_SAVINGS
	X	I_SM_CAR1_DEBT	Imputation Flag For C_SM_CAR1_DEBT
	X	I_SM_CAR1_VALUE	Imputation Flag For C_SM_CAR1_VALUE
	X	I_SM_CAR2_DEBT	Imputation Flag For C_SM_CAR2_DEBT
	X	I_SM_CAR2_VALUE	Imputation Flag For C_SM_CAR2_VALUE
	X	I_SM_EARN_MONTH	Imputation Flag For C_SM_EARN_MONTH
	X	I_SM_EARN_YR	Imputation Flag For C_SM_EARN_YR
	X	I_SM_EMPLOYMENT	Imputation Flag For C_SM_EMPLOYMENT
	X	I_SM_ETHNICITY	Imputation Flag For C_SM_ETHNICITY
	X	I_SM_HRS_WK	Imputation Flag For C_SM_HRS_WK
	X	I_SM_INCOME_TOTAL	Imputation Flag For C_SM_INCOME_TOTAL
		I_SM_RACE	Imputation Flag For C_SM_RACE
		I_SSA_BENEFITS_AMT	Imputation Flag For C_SSA_BENEFITS_AMT
	X	I_SSI_LAST_MONTH	Imputation Flag For C_SSI_LAST_MONTH
	X	I_SSI_LAST_MONTH_AMT	Imputation Flag For C_SSI_LAST_MONTH_AMT
		I_SSI_PAYMENTS	Imputation Flag For C_SSI_PAYMENTS
	Λ	1_991_1 V 1 MEM 19	Imputation Flag For C_SSI_I ATMENTS

PUF	RUF	Variable	LABEL
		I_SSI_PAYMENTS_AMT	Imputation Flag For C_SSI_PAYMENTS_AMT
		I_STATE_ASSISTANCE	Imputation Flag For C_STATE_ASSISTANCE
		I_STOCK	Imputation Flag For C_STOCK
		I_ST_ASSIST_AMT	Imputation Flag For C_ST_ASSIST_AMT
		I_Sex	Imputation Flag For C_SEX
		I_TOTAL_ASSETS_WITH_CA	
	X	R	Imputation Flag For C_TOTAL_ASSETS_WITH_CAR
		$I_TOTAL_HOUSEHOLD_ASSE$	
	X	TS	Imputation Flag For C_TOTAL_HOUSEHOLD_ASSETS
		I_TOTAL_HOUSEHOLD_DEB	
			Imputation Flag For C_TOTAL_HOUSEHOLD_DEBT
		I_TOTAL_SM_MEDICAL_DEB	1
	X		Imputation Flag For C_TOTAL_SM_MEDICAL_DEBT
	X	I_UNEARNED_INCOME_1	Imputation Flag For C_UNEARNED_INCOME_1
	71		imputation ring for e_orter natabetic ovine_r
	X	I_UNEARNED_INCOME_10	Imputation Flag For C_UNEARNED_INCOME_10
	Λ	I_UNEARNED_INCOME_IU	Imputation Flag For C_ONEARINED_INCOME_10
	v	I LINEADNED INCOME 11	Imputation Flor For C. LINE ADNED, INCOME. 11
	X	I_UNEARNED_INCOME_11	Imputation Flag For C_UNEARNED_INCOME_11
	**	A ADVENTURE DAGGLES 44	
	X	I_UNEARNED_INCOME_12	Imputation Flag For C_UNEARNED_INCOME_12
	X	I_UNEARNED_INCOME_13	Imputation Flag For C_UNEARNED_INCOME_13
	X	I_UNEARNED_INCOME_14	Imputation Flag For C_UNEARNED_INCOME_14
	X	I_UNEARNED_INCOME_15	Imputation Flag For C_UNEARNED_INCOME_15
	X	I_UNEARNED_INCOME_2	Imputation Flag For C_UNEARNED_INCOME_2
	X	I_UNEARNED_INCOME_3	Imputation Flag For C_UNEARNED_INCOME_3
	X	I_UNEARNED_INCOME_4	Imputation Flag For C_UNEARNED_INCOME_4
	4.		
	X	I_UNEARNED_INCOME_5	Imputation Flag For C_UNEARNED_INCOME_5
	11	I_OTAL/INTALD_ITACOMIE_3	imputation ring rot C_OTILITATIVED_INCOME_3

X I_UNEARNED_INCOME_6 Imputation Flag For C_UNEARNED_INCOME_6

PUF	RUF	Variable	LABEL
	X	I_UNEARNED_INCOME_7	Imputation Flag For C_UNEARNED_INCOME_7
	X	I_UNEARNED_INCOME_8	Imputation Flag For C_UNEARNED_INCOME_8
	X	I_UNEARNED_INCOME_9	Imputation Flag For C_UNEARNED_INCOME_9
	X	I_WELFARE	Imputation Flag For C_WELFARE
	X	I_WELFARE_AMT	Imputation Flag For C_WELFARE_AMT
	X	J1	CHECK: Age <18 or 18 +
X	X	J10	Who paid for childcare
	X	J11_AMT	How much was paid for childcare
	X	J11_PER	How much was paid for childcare
X	X	J12	Satisfaction with childcare
	X	J2	CHECK: I1- R working last month
X	X	J3	Respondent in school or job training
	X	J4	Who cared for NAME
X	X	J5	How is caregiver related to NAME
	X	J6	Daycare for children w/ disabilities
X	X	J7	Where was NAME cared for most
	X	J8	# of hours NAME was cared for
	X	J9	CHECK: J4- who cares for NAME
	X	K1	CHECK: RTYPE
	X	K108_AMT	Total household income last month
	X	K110_AMT	NAME's total income last month
	X	K113	CHECK: multiple answers K112
X	X	K114	First priority for addtl. \$100/month
	X	K116	CHECK: multiple answers K115
X	X	K117	If \$100 less/mth-first cut back on
X	X	K119	Rcvd WIC in the past year
X	X	K120	Rcvd energy assistance in past year
X	X	K122	Rcvd free/reduced price school lunches
X	X		Own checking account
X	X	K123b	Own savings account
X	X	K123c	Amt CDs, noted, mutual funds, bonds
X	X	K123d	Amt cash at home or somewhere else
X	X	K123e	Own items valued at >\$500
X	X	K123f	Own burial expense account
X	X	K123g	Own other assets
	X	K124	# of cars owned
	X	K125_AMT	Value of only car

PUF	RUF	Variable	LABEL
	X	K126_AMT	Amount owed on only car
	X	K127_AMT	Value of oldest car
	X	K128_AMT	Amount owed on oldest car
	X	K129_AMT	Value of next oldest car
	X	K130_AMT	Amount owed on next oldest car
	X	K131	Credit card, medical, loan debt
	X	K132	Amount of debt
X	X	K18	Owed child support
	X	K35_AMT	Total household income last month
	X	K38	CHECK: multiple answers K37
X	X	K39	First priority for addtl \$100/month
	X	K41	CHECK: multiple answers K40
X	X	K42	If \$100 less/mth-first cut back on
X	X	K43	1996, spouse/partner in household
X	X	K44	1996, rcvd welfare
X	X	K45	1996, rcvd state general assistance
X	X	K46	1996, revd food stamps
X	X	K47	1996, revd child support
	X	K48	1996, rcvd foster care
X	X	K49	1996, rcvd SSI (besides NAME)
X	X	K50	1996, rcvd other SSA payments
X	X	K51	1996, revd pension or annuity
X	X	K52	1996, rcvd payments from other sources
X	X	K53	Rcvd WIC in the past year
X	X	K54	Rcvd energy assistance in past year
X	X	K55	Rcvd free/reduced price school lunches
X		K56a	Own checking account
X	X	K56b	Own savings account
X	X	K56c	Amt CDs, noted, mutual funds, bonds
X		K56d	Amt cash at home or somewhere else
X	X	K56e	Own items valued at >\$500
X	X	K56f	Own burial expense account
X	X	K56g	Own other assets
X	X	K57	# of cars owned
	X	K58_AMT	Value of only car
	X	K59_AMT	Amount owed on only car
	X	K60_AMT	Value of oldest care
	X	K61_AMT	Amount owed on oldest car
	X	K62_AMT	Value of next oldest car
	X	K63_AMT	Amount owed on next oldest car

PUF	RUF	[*] Variable	LABEL
		K64	CHECK: AGE <16, 16+
X		K65	NAME own car
	X	K66_AMT	Value of NAME's car
**	X	K67_AMT	Amount owed on NAME's car
X		K68	Credit card, medical, loan debt
X		K69	Amount of debt
	X	K71	CHECK: living w/ spouse/kids
X		K89	Owed child support
		K97	Rcvd other SSA benefits
		LI	CHECK: Age <17, 17+
		L10_MO	How long at current domicile - month
		L10_YR	How long at current domicile - year
***		L11	CHECK: family pay rent/mortage
X		L12	Who pays for domicile
X		L13	Amount paid for housing per month
***		L14	CHECK: family own/rent/other
X		L15	Receiving housing subsidy
X		L16	Home owned by housing authority
X	X	L17	Home modified to accommodate disability
37	37	1.10.1	Spec features/accommodations home has - widened
X		L18_1	doorways/hallways
	X	L18_10	Spec features/accommodations home has - other
	37	1 10 11	Spec features/accommodations home has - safety/security devices
	Λ	L18_11	(fences/locks)
	v	1 10 12	Spec features/accommodations home has - fire system/smoke
	Λ	L18_12	detectors
	v	1 10 12	Spec features/accommodations home has - remodeling/additions
	X	L18_13	(more space/larger rooms)
	v	L18_14	Spec features/accommodations home has - TTL phone/TLE phone for deaf
		L18_15	Spec features/accommodations home has - lighting modifications
	Λ	L18_13	
	v	L18_16	Spec features/accommodations home has - one floor, ranch, one- story house
		L18_17	Spec features/accommodations home has - ambulatory device
X		L18_17 L18_2	Spec features/accommodations home has- ramps
X		L18_3	Spec features/accommodations home has - railings
Λ		L18_4	Spec features/accommodations home has - automatic doors
		L18_5	Spec features/accommodations home has - accessible parking
	Λ	L10_3	Spec reactives/accommodations nome has - accessione parking
X	X	L18_6	Spec features/accommodations home has - bathroom modifications

PUF	RUF	Variable	LABEL
	X	L18_7	Spec features/accommodations home has - kitchen modifications
			Spec features/accommodations home has - elevator, chair lift, stair
	X	L18_8	glide
		L18_9	Spec features/accommodations home has - alerting devices
X	X	L19	Name needs spec features/accomodations
	X	L2	How long at current domicile
			Spec features/accommodations needed - widened
	X	L20_1	doorways/hallways
	X	L20_10	Spec features/accommodations needed - other
			Spec features/accommodations needed - safety/security devices
	X	L20_11	(fences/locks)
			Spec features/accommodations needed - fire system/smoke
	X	L20_12	detectors
			Spec features/accommodations needed - additions/additions (more
	X	L20_13	space/larger rooms)
			Spec features/accommodations needed - TTL phone/TLE phone
		L20_14	for deaf
	X	L20_15	Spec features/accommodations needed - lighting modifications
			Spec features/accommodations needed - one floor, ranch, one-story
		L20_16	house
		L20_17	Spec features/accommodations needed - ambulatory device
		L20_2	Spec features/accommodations needed- ramps
		L20_3	Spec features/accommodations needed - railings
		L20_4	Spec features/accommodations needed - automatic doors
		L20_5	Spec features/accommodations needed - accessible parking
		L20_6	Spec features/accommodations needed - bathroom modifications
	X	L20_7	Spec features/accommodations needed - kitchen modifications
	3.7	1.20.0	Spec features/accommodations needed - elevator, chair lift, stair
		L20_8	glide
	X	L20_9	Spec features/accommodations needed - alerting devices
v	v	101 1	Why doesn't NAME have accommodations - can't afford the
X	X	L21_1	modifications
v	v	1.21.2	Why doesn't NAME have accommodations - not allowed to make
X	X	L21_2	changes
v	v	1 21 2	Why doesn't NAME have accommodations - don't know how to
X	Λ	L21_3	make changes
X	Y	L21_4	Why doesn't NAME have accommodations - never got around to it
11	Λ	<i>⊔</i> 21_⊤	Why doesn't NAME have accommodations - not my decision/live
X	X	L21_5	in a group house
2 1	11	221_0	in a Group nouse

PUF	RUF	Variable	LABEL
X	v	L21_6	Why doesn't NAME have accommodations - other
Λ	Λ	L21_0	Why doesn't NAME have accommodations - other Why doesn't NAME have accommodations -
X	Y	L21_7	renting/apartment/need to ask landlord
X		L21_7 L21_8	Why doesn't NAME have accommodations - home too small/old
71	71	L21_0	Why doesn't NAME have accommodations - don't need/not
X	Y	L21_9	necessary/don't want
21		L21_5 L22	CHECK: Age <17, 17+
		L23	CHECK: K61=0/ K69=0 (no cars)
X		L24	Frequency NAME drives
X		L25	Driving affected by health problem
21		L26	CHECK: L24=04 - NAME never drives
X		L27	Car modified for disability
21		L28_1	Car's special features - hand controls
		L28_10	Car's special features - special car seat
		L28_11	Car's special features - special seat belt
		220_11	Car's special features - adapter for nubulizer, inhaler, breathing
	X	L28 12	machine
		L28_13	Car's special features - wheelchair lift/ carrier
		L28_14	Car's special features - special mirrors
		L28_15	Car's special features - handicapped sticker/plates
		L28_16	Car's special features - tinted windows/ sun visor
		L28_17	Car's special features - van
		L28_2	Car's special features - hand rails, ramps, lifts
		L28_3	Car's special features - power controls
		L28_4	Car's special features - automatic transmission
		L28_5	Car's special features - air conditioning
		L28_6	Car's special features - button that opens doors
	X	L28_7	Car's special features - trunk or storage area
	X	L28_8	Car's special features - other
	X	L28_9	Car's special features - child safety locks
X	X	L29	Name needs spec features on car
	X	L3	Type of domicile
	X	L30_1	Car's special features NAME needs - hand controls
	X	L30_10	Car's special features NAME needs - special car seat
	X	L30_11	Car's special features NAME needs - special seat belt
			Car's special features NAME needs - adapter for nubulizer, inhaler,
	X	L30_12	breathing machine
	X	L30_13	Car's special features NAME needs - wheelchair lift/ carrier
	X	L30_14	Car's special features NAME needs - special mirrors
	X	L30_15	Car's special features NAME needs - handicapped sticker/plates

PUF	RUF	Variable	LABEL
	X	L30_16	Car's special features NAME needs - tinted windows/ sun visor
	X	L30_17	Car's special features NAME needs - van
	X	L30_2	Car's special features NAME needs - hand rails, ramps, lifts
	X	L30_3	Car's special features NAME needs - power controls
	X	L30_4	Car's special features NAME needs - automatic transmission
	X	L30_5	Car's special features NAME needs - air conditioning
	X	L30_6	Car's special features NAME needs - button that opens doors
	X	L30_7	Car's special features NAME needs - trunk or storage area
	X	L30_8	Car's special features NAME needs - other
	X	L30_9	Car's special features NAME needs - child safety locks
	X	L31_1	Why doesn't NAME have car spec features - can't afford
			Why doesn't NAME have car spec features - not allowed to make
	X	L31_2	changes
			Why doesn't NAME have car spec features - don't know how to
	X	L31_3	make changes
	X	L31_4	Why doesn't NAME have car spec features - never got around to it
		L31_5	Why doesn't NAME have car spec features - not my car
	X	L31_6	Why doesn't NAME have car spec features - other
			Why doesn't NAME have car spec features - doesn't need yet (too
	X	L31_7	young/small)
	X	L32	CHECK: Age <17, 17+
X	X	L33	Name used public transportation
X	X	L34	Impairment prevents public transit use
	X	L35	CHECK: not used public transit
X	X	L36	Frequency NAME used public transit
X	X	L37	Level of difficulty in using public transit
X	X	L38	Special disabled public transit available
X	X	L39	NAME used special disablity transit
	X	L4	Housing exclusively for the disabled
	X	L40	Frequency- special disablity transit use
X	X	L41	Dependibility- special disablity transit
X	X	L42	Accessibility- special disablity transit
	X	L43_1	Rsn not using special disability transit - don't need/want service
	X	L43_10	Rsn not using special disability transit - cost
	X	L43_11	Rsn not using special disability transit - other
	X	L43_12	Rsn not using special disability transit - medical insurance
	X	L43_13	Rsn not using special disability transit - don't qualify
	X	L43_14	Rsn not using special disability transit - didn't apply in time

PUF	RUF	Variable	LABEL
			Don not weight and it distributes and NAME drives himself on
	X	L43_15	Rsn not using special disability transit - NAME drives himself or other drive him
		L43_13 L43_2	Rsn not using special disability transit - don't know how to use
	Λ	L43_2	Rsn not using special disability transit - need help from another
	X	L43_3	person
		L43_4	Rsn not using special disability transit - no phone
		L43_5	Rsn not using special disability transit - can't read
		L43_6	Rsn not using special disability transit - illness
		L43_7	Rsn not using special disability transit - service unreliable
		L43_8	Rsn not using special disability transit - hours inadequate
		L43_9	Rsn not using special disability transit - can't get reservation
X		L44	Needed special disability transist
			Rsn not using special disability transit in last year - don't need/war
	X	L45_1	service
		L45_10	Rsn not using special disability transit in last year - cost
	X	L45_11	Rsn not using special disability transit in last year - other
			Rsn not using special disability transit in last year - medical
	X	L45_12	insurance
	X	L45_13	Rsn not using special disability transit in last year - don't qualify
			Rsn not using special disability transit in last year - didn't apply in
	X	L45_14	time
			Rsn not using special disability transit in last year - NAME drives
	X	L45_15	himself or other drive
			Rsn not using special disability transit in last year - don't know
	X	L45_2	how to use
			Rsn not using special disability transit in last year - need help from
		L45_3	another person
		L45_4	Rsn not using special disability transit in last year - no phone
		L45_5	Rsn not using special disability transit in last year - can't read
	X	L45_6	Rsn not using special disability transit in last year - illness
			Rsn not using special disability transit in last year - service
	X	L45_7	unreliable
			Rsn not using special disability transit in last year - hours
	X	L45_8	inadequate
	**	T 45 O	Rsn not using special disability transit in last year - can't get
		L45_9	reservation
		L5	Provides help w/ daily living tasks
		L6	Who pays for housing for disabled
v		L7	Out pckt exp of housing for disabled
X	X	L8	How is domicile paid for

PUF	RUF	Variable	LABEL
		L9	CHECK: Age <17, 17+
	X	LIVF51	UNV-FEDERAL LIVING ARRANGEMENT FROM SSR
		LIVF91	UNV-FEDERAL LIVING ARRANGEMENT FROM SSR
		LSTAT51	UNV-LAST PAYMENT STATUS BEFORE RECORD WA
		LSTAT91	UNV-LAST PAYMENT STATUS BEFORE RECORD WA
		LSTDTE51	UNV-LAST PAYMENT STATUS DATE FROM SSR SE
	X	LSTDTE91	UNV-LAST PAYMENT STATUS DATE FROM SSR SE
	X	M1	CHECK: RTYPE
	X	M10	Parent2 born in US or abroad
	X	M11	Name's ethnic background
		M12_1	Name's race
		M12_2	Name's race
		M12_3	Name's race
		M12_4	Name's race
		M12_5	Name's race
	X	M13	Name born in US or abroad
	X	M14	Language spoken in household
X	X	M15	Other household member with disability
		M16_1	Person's relationship to NAME
	X	M16_10	Person's relationship to NAME
	X	M16_11	Person's relationship to NAME
	X	M16_12	Person's relationship to NAME
	X	M16_13	Person's relationship to NAME
	X	M16_14	Person's relationship to NAME
	X	M16_15	Person's relationship to NAME
		M16_16	Person's relationship to NAME
	X	M16_17	Person's relationship to NAME
	X	M16_18	Person's relationship to NAME
	X	M16_19	Person's relationship to NAME
	X	M16_2	Person's relationship to NAME
	X	M16_20	Person's relationship to NAME
	X	M16_22	Person's relationship to NAME
	X	M16_3	Person's relationship to NAME
	X	M16_4	Person's relationship to NAME
	X	M16_5	Person's relationship to NAME
	X	M16_6	Person's relationship to NAME
	X	M16_7	Person's relationship to NAME
	X	M16_8	Person's relationship to NAME
	X	M16_9	Person's relationship to NAME
	X	M17	Check: AGE 17, 17+

PUF	RUF	`Variable	LABEL
	X	M18	Name's marital status
X	X	M19	Name's ethnic background
***	X	M2	Parent1 education level
X	X	M20_1	Name's race
X	X	M20_2	Name's race
X	X	M20_3	Name's race
X	X	M20_4	Name's race
X	X	M20_5	Name's race
	X	M21	Name born in US or abroad
	X	M22	Language spoken in household
	X	M23	Mother's education level Father's education level
X	X	M24	
Λ	X X	M25 M26_1	Other family member with disability
	X	M26_10	Person's relationship to NAME Person's relationship to NAME
	X	M26_11	Person's relationship to NAME
	X	M26_12	Person's relationship to NAME
	X	M26_13	Person's relationship to NAME
	X	M26_14	Person's relationship to NAME
	X	M26_15	Person's relationship to NAME
	X	M26_16	Person's relationship to NAME
	X	M26_17	Person's relationship to NAME
	X	M26_18	Person's relationship to NAME
	X	M26_19	Person's relationship to NAME
	X	M26_2	Person's relationship to NAME
	X	M26_20	Person's relationship to NAME
	X	M26_3	Person's relationship to NAME
	X	M26_4	Person's relationship to NAME
	X	M26_5	Person's relationship to NAME
	X	M26_6	Person's relationship to NAME
	X	M26_7	Person's relationship to NAME
	X	M26_8	Person's relationship to NAME
	X	M26_9	Person's relationship to NAME
X	X	M27	Name's marital status
	X	M28	Name's SP ethnic background
	X	M29_1	Name's SP race
	X	M29_2	Name's SP race
	X	M29_3	Name's SP race
	X	M29_4	Name's SP race
	X	M29_5	Name's SP race

PUF	RUF	Variable	LABEL
T 7	1 7		Demont 1 other; he demond
X	X X	M3 M30	Parent1 ethnic background Name's SP born in US or abroad
	X	M31	Name's SP education level
		M4_1	Parent1 race
		M4_2	Parent1 race
	X		Parent1 race
		M4_3 M4_4	Parent1 race
		M4_5	Parent1 race
	X	M5	Parent1 born in US or abroad
X	X	M6	Marital Status
71	X	M7	Parent2 education level
X	X	M8	Parent2 ethnic background
71	X	M9_1	Parent2 race
			Parent2 race
		M9_3	Parent2 race
	X		Parent2 race
		M9_5	Parent2 race
X	X	MPRID	MPR assigned ID
X	X	N1	General health
X	X	N10	Condition expected to last > 12 months
X	X	N11	Physical, occupational speech therapy
X	X	N12	Therapy b/c of health condition
X	X	N13	Condition expected to last > 12 months
X	X	N14	Trmt/counsel b/c emot/devlpmt/behav prob
X	X	N15	Condition expected to last > 12 months
	X	N16	CHECK: health condition
	X	N17	Health condition when applying for SSI
	X	N18_1	What health condition/problem
	X	N18_2	What health condition/problem
	X	N18_3	What health condition/problem
	X	N19	Limited by disability compared to peers
X	X	N2	Use of additional services
	X	N20	Disability affects ability to do things
	X	N21	Severity of NAME's condition
	X	N22	NAME's health care needs
	X	N23_1	Main health condition or problem
		N23_2	Main health condition or problem
	X	N23_3	Main health condition or problem
	X	N24_NUM	Duration of health condition/problem
	X	N24_PER	Duration of health condition/problem

PUF	RUF	Variable	LABEL
X	X	N25	Other health conditions/problems
11	X	N26_1	What other health conditions/problems
	X	N26_2	What other health conditions/problems
	X	N27	Year NAME last lived with respondent
	X	N28	Need help w/ personal care
	X	N29_A	Need help w/ bathing/showering
	X	N29_B	Need help w/ dressing
	X	N29_C	Need help w/ eating
	X	N29_d	Need help w/ getting in/out of bed
	X	N29_e	Need help w/ walking
	X	N29_f	Need help w/ getting outside
	X	 N29_g	Need help w/ using/getting to toilet
	X	N29_h	Need help w/ getting around inside home
X	X	N3	Use more services b/c of hlth condition
X	X	N30a	Trouble sleeping
X	X	N30b	Trouble concentrating
X	X	N30c	Trouble getting along with peers
	X	N31	Last grade completed
	X	N31A	High School Diploma or GED
	X	N32	Received job training
	X	N33	Received life skills training
	X	N34	Received SSI for NAME
	X	N35	Receiving SSI at 18th b-day
	X	N35T	CHECK: Age
	X	N36	Benefits redetermined at 18th b-day
	X	N37	Final decision about NAME's eligibility
	X	N38	What was final eligibility decision
	X	N39	Final decision pending or on appeal
X	X	N4	Condition expected to last > 12 months
	X	N40_1	Why was SSI lost - NAME's income too high
	X	N40_10	Why was SSI lost - incarcerated
	X	N40_11	Why was SSI lost - turned 18
	X	N40_12	Why was SSI lost - went into mental health facility/hospital
	X	N40_2	Why was SSI lost - NAME's assets too high
	X	N40_3	Why was SSI lost - determined medically ineligible
	X	N40_4	Why was SSI lost - determined able to work
	X	N40_5	Why was SSI lost - did not follow program rules
	X	N40_6	Why was SSI lost - NAME married/remarried
	X	N40_7	Why was SSI lost - NAME not in school/job training
	X	N40_8	Why was SSI lost - other

PUF RUF Variable	LABEL
X N41_1	Why was SSI lost - NAME's income too high
X N41_1 X N41_10	Why was SSI lost - incarcerated
X N41_10 X N41_11	Why was SSI lost - Incarcerated Why was SSI lost - turned 18
X N41_11 X N41_12	Why was SSI lost - turned 16 Why was SSI lost - went into mental health facility/hospital
X N41_12 X N41_2	Why was SSI lost - NAME's assets too high
X N41_2 X N41_3	Why was SSI lost - determined medically ineligible
X N41_3 X N41_4	Why was SSI lost - determined able to work
X N41_5	Why was SSI lost - did not follow program rules
X N41_5 X N41_6	Why was SSI lost - NAME married/remarried
X N41_0 X N41_7	Why was SSI lost - NAME not in school/job training
X N41_8	Why was SSI lost - other
X N42	Time when no SSI benefit post 1996
X N43	CHECK: N42 agree with preload
X N44	Confirm time with no SSI
X N45_1	Why was SSI lost - parents' income too high
X N45_10	Why was SSI lost - incarcerated
X N45_11	Why was SSI lost - turned 18
X N45_12	Why was SSI lost - went into mental health facility/hospital
X N45_2	Why was SSI lost - parents' assets too high
X N45_3	Why was SSI lost - NAME's income too high
X N45_4	Why was SSI lost - NAME's assets too high
X N45_5	Why was SSI lost - determined medically ineligible
X N45_6	Why was SSI lost - did not follow program rules
X N45_7	Why was SSI lost - married/remarried
X N45_8	Why was SSI lost - moved in with family/ other person
X N45_9	Why was SSI lost - other
X N46	Lose Medicaid when SSI was lost
X N47_MON	Month incarcerated
X N47_YEAR	Year incarcerated
X N48_1	Charges incarcerated for
X N48_10	Charges incarcerated for
X N48_11	Charges incarcerated for
X N48_12	Charges incarcerated for
X N48_13	Charges incarcerated for
X N48_14	Charges incarcerated for
X N48_15	Charges incarcerated for
X N48_16	Charges incarcerated for
X N48_17	Charges incarcerated for
X N48_18	Charges incarcerated for
X N48_19	Charges incarcerated for

PUF	RUF	Variable	LABEL
	X	N48_2	Charges incarcerated for
	X	N48_20	Charges incarcerated for
	X	N48_21	Charges incarcerated for
	X	N48_3	Charges incarcerated for
	X	N48_4	Charges incarcerated for
	X	N48_5	Charges incarcerated for
	X	N48_6	Charges incarcerated for
	X	N48_7	Charges incarcerated for
	X	N48_8	Charges incarcerated for
	X	N48_9	Charges incarcerated for
	X	N49_AMT	Amount of time expected to serve
	X	N49_PER	Amount of time expected to serve
X	X	N5	Need/use more medication than usual
	X	N50	# arrests, charges, parole violations
	X	N51	Name- ever worked
	X	N52_MON	Name- last worked month/year
	X	N52_YEAR	Name- last worked month/year
	X	N53	Name's ethnic background
	X	N54_1	Name's race
	X	N54_2	Name's race
	X	N54_3	Name's race
	X	N54_4	Name's race
	X	N54_5	Name's race
	X	N55	Name born in US or abroad
	X	N56	Language spoken in household
X	X	N6	Need for prescription medicine
X	X	N7	Condition expected to last > 12 months
X	X	N8	Limited/prevented compared peers
X	X	N9	Limited b/c of health condition
	X	NOP_900	00-Number of Payment Entries
	X	NOP_996	96-Number of Payment Entries
	X	NOTICEST	OLD UNV FILE
X	X	NRTYPE	Questionnaire Pathing
	X	O10	How tiring was interview for respondent
	X	O11	Difficulty hearing during interview
	X	O12	Difficulty hearing affect the interview
	X	O1A_AN	Incentive sent to
	X	O1B_AN	Check written to
	X	O1C_AN	Incentive payment address
	X	O2A1_AN	Contact 1

PUF	RUF	Variable	LABEL
	v	O2A2 AN	Contact 2
	X X	O2A2_AN O3	Respondent
	X	04	NAME assisted during interview
	X	05	Assitant/proxy's relationship to NAME
	X	06_1	Why was assistant/proxy needed
	X	O6_10	Why was assistant/proxy needed
	X	O6_10	Why was assistant/proxy needed
	X	O6_12	Why was assistant/proxy needed
	X	O6_2	Why was assistant/proxy needed
	X	06_3	Why was assistant/proxy needed
	X	O6_4	Why was assistant/proxy needed
	X	_ O6_5	Why was assistant/proxy needed
	X	_ O6_6	Why was assistant/proxy needed
	X	O6_7	Why was assistant/proxy needed
	X	O6_8	Why was assistant/proxy needed
	X	O6_9	Why was assistant/proxy needed
	X	O7	Respondent intellectually capable
	X	O8	Respondent's answers accurate
	X	O9	Respondent understood question
	X	PAN	96-Social Security Number
	X	PDSCC00	00-Residence State/County/DO Code
	X	PDSCC51	UNV-RESIDENCE STATE AND COUNTY CODE FROM
	X	PDSCC91	UNV-RESIDENCE STATE AND COUNTY CODE FROM
	X	PDSCC96	96-Residence State/County/DO Code
	X	PDX8321	UNV-PRIMARY DIAGNOSIS CODE FROM DDS DECI
	X	PDX8322	UNV-PRIMARY DIAGNOSIS CODE FROM DDS DECI
X		PI_BURIAL_EXPENSES	Imputation flag for PI_BURIAL_EXPENSES
X		PI_C25	Imputation flag for PI_C25
X		PI_C9	Imputation flag for PI_C9
X		PI_CAR1_DEBT	Imputation flag for PI_CAR1_DEBT
X		PI_CAR1_VALUE	Imputation flag for PI_CAR1_VALUE
X		PI_CAR2_DEBT	Imputation flag for PI_CAR2_DEBT
X		PI_CAR2_VALUE	Imputation flag for PI_CAR2_VALUE
X		PI_CASH	Imputation flag for PI_CASH
X		PI_CHECKING	Imputation flag for PI_CHECKING
X		PI_CHILD_SUPPORT	Imputation flag for PI_CHILD_SUPPORT
X		PI_F13	Imputation flag for PI_F13
X		PI_F18	Imputation flag for PI_F18
X		PI_F23	Imputation flag for PI_F23
X		PI_F30	Imputation flag for PI_F30

PUF	RUF Variable	LABEL
X	PI_F35	Imputation flag for PI_F35
X	PI_F42	Imputation flag for PI_F42
X	PI_F47	Imputation flag for PI_F47
X	PI_F53	Imputation flag for PI_F53
X	PI_F59	Imputation flag for PI_F59
X	_ PI_F63	Imputation flag for PI_F63
X	PI_F67A_AMT	Imputation flag for PI_F67A_AMT
X	PI_F67B_AMT	Imputation flag for PI_F67B_AMT
X	PI_F67D_AMT	Imputation flag for PI_F67D_AMT
X	PI_F67F_AMT	Imputation flag for PI_F67F_AMT
X	PI_F67G_AMT	Imputation flag for PI_F67G_AMT
X	PI_F67H_AMT	Imputation flag for PI_F67H_AMT
X	PI_F67PI_AMT	Imputation flag for PI_F67PI_AMT
X	PI_F67P_AMT	Imputation flag for PI_F67P_AMT
X	PI_F7	Imputation flag for PI_F7
X	PI_F71	Imputation flag for PI_F71
X	PI_F72	Imputation flag for PI_F72
X	PI_FOOD_STAMPS	Imputation flag for PI_FOOD_STAMPS
X	PI_FOSTER_CARE	Imputation flag for PI_FOSTER_CARE
X	PI_HEALTH_INSURANCE	Imputation flag for PI_HEALTH_INSURANCE
X	PI_HOUSEHOLD_INCOME	Imputation flag for PI_HOUSEHOLD_INCOME
X	PI_HOUSEHOLD_ITEMS	Imputation flag for PI_HOUSEHOLD_ITEMS
X	PI_OTHER_ASSET	Imputation flag for PI_OTHER_ASSET
X	PI_OTHER_SOURCES	Imputation flag for PI_OTHER_SOURCES
X	PI_OTHER_SSA_BENEFITS	Imputation flag for PI_OTHER_SSA_BENEFITS
X	PI_OUT_PCKT_HLTH_EXP	Imputation flag for PI_OUT_PCKT_HLTH_EXP
X	PI_PARENT1_EARN_MONTH	Imputation flag for PI_PARENT1_EARN_MONTH
X	PI_PARENT1_EARN_YR	Imputation flag for PI_PARENT1_EARN_YR
X X X	PI_PARENT1_EMPLOYMENT PI_PARENT1_HRS_WK PI_PARENT1_RACE	Imputation flag for PI_PARENT1_EMPLOYMENT Imputation flag for PI_PARENT1_HRS_WK Imputation flag for PI_PARENT1_RACE

PUF	RUF	Variable	LABEL
X		PI_PARENT2_EARN_MONTH	Imputation flag for PI_PARENT2_EARN_MONTH
X		PI_PARENT2_EARN_YR	Imputation flag for PI_PARENT2_EARN_YR
X		PI_PARENT2_EMPLOYMENT	Imputation flag for PI_PARENT2_EMPLOYMENT
X		PI_PARENT2_HRS_WK	Imputation flag for PI_PARENT2_HRS_WK
X		PI_PARENT2_RACE	Imputation flag for PI_PARENT2_RACE
X		PI_PENSION_AND_ANNUITY	Imputation flag for PI_PENSION_AND_ANNUITY
X		PI_SAVINGS	Imputation flag for PI_SAVINGS
X		PI_SM_EARN_MONTH	Imputation flag for PI_SM_EARN_MONTH
X		PI_SM_EARN_YR	Imputation flag for PI_SM_EARN_YR
X		PI_SM_EMPLOYMENT	Imputation flag for PI_SM_EMPLOYMENT
X		PI_SM_ETHNICITY	Imputation flag for PI_SM_ETHNICITY
X		PI_SM_HRS_WK	Imputation flag for PI_SM_HRS_WK
X		PI_SM_INCOME_TOTAL	Imputation flag for PI_SM_INCOME_TOTAL
X		PI_SM_RACE	Imputation flag for PI_SM_RACE
v		DI CCA DENIEEITC AMT	Immutation floo for DI CCA DENIEUTS AMT
X		PI_SSA_BENEFITS_AMT	Imputation flag for PI_SSA_BENEFITS_AMT
X		PI_SSI_LAST_MONTH	Imputation flag for PI_SSI_LAST_MONTH
X		PI_SSI_LAST_MONTH_AMT	Imputation flag for PI_SSI_LAST_MONTH_AMT
X		PI_SSPI_PAYMENTS	Imputation flag for PI_SSPI_PAYMENTS
X		PI_SSPI_PAYMENTS_AMT	Imputation flag for PI_SSPI_PAYMENTS_AMT
X		PI_STATE_ASSISTANCE	Imputation flag for PI_STATE_ASSISTANCE
X		PI_STOCK	Imputation flag for PI_STOCK
		PI_TOTAL_ASSETS_WITH_C	
X		AR	Imputation flag for PI_TOTAL_ASSETS_WITH_CAR
		PI_TOTAL_HOUSEHOLD_ASS	
X		ETS	Imputation flag for PI_TOTAL_HOUSEHOLD_ASSETS
		PI_TOTAL_HOUSEHOLD_DE	
X		BT	Imputation flag for PI_TOTAL_HOUSEHOLD_DEBT
		PI_TOTAL_SM_MEDICAL_DE	
X		BT	Imputation flag for PI_TOTAL_SM_MEDICAL_DEBT
X		PI_WELFARE	Imputation flag for PI_WELFARE
	X	PLCDE51	UNV-APPEALS CODE FROM SSR SELECTED 05/00

PUF	RUF	Variable	LABEL
	X	PLCDE91	UNV-APPEALS CODE FROM SSR SELECTED 09/00
	X	PLDTE51	UNV-APPEALS DATE FROM SSR SELECTED 05/00
	X	PLDTE91	UNV-APPEALS DATE FROM SSR SELECTED 09/00
	X	PSTA1296	OLD UNV FILE
		PSTA197	OLD UNV FILE
	X	PSTAT	Payment Status 4/2002
	X	PSTAT00	00-Payment Status Code
	X	PSTAT96	96-Payment Status Code
X		PSU	Analysis PSU
X		P_AGE	PUF: Age at Time of Survey Administration
X		P_B43	PUF: # days missed school/work for illness
X		P_B44	PUF: # days in bed > half day w/ illness
X		P_C25	PUF: Total out pckt mh/sa expenses
X		P_C5	PUF: # doctors visits
X		P_C6	PUF: # hospitalizations
X		P_C7	PUF: # er visits
X		P_C8	PUF: # surgeries
X		P_C9	PUF: Total out pckt health expenses
X		P_CAR1_DEBT	PUF: Amount owed on only car
X		P_CAR1_VALUE	PUF: Value of only car
X		P_CAR2_DEBT	PUF: Amount owed on oldest car
X		P_CAR2_VALUE	PUF: Value of oldest car
X		P_CHILDREN	PUF: Number Of Children under Age 18 in HH
X		P_DG_HLTH_COND_1	PUF: Diagnostic Group- Health Condition-1
X		P_DG_MAIN_HLTH_COND_1	PUF: Diagnostic Group-Main Health Condition-1
		P_DG_OTHER_HLTH_COND_	
X		1	PUF: Diagnostic Group- Other Health Condition-1
X		P_E42	PUF: Type of school NAME is attending
X		P_E45	PUF: Earned a diploma/GED
X		P_E8	PUF: Number of days absent from school
X		P_F13	PUF: Out pckt exps - respiratory therapy
X		P_F18	PUF: Out pckt exps - recreational therapy
X		P_F23	PUF: Out polit cause and a thousand
X		P_F30	PUF: Out polit care a social transit a miss.
X		P_F35	PUF: Out polit owns for personal core attendant
X X		P_F42	PUF: Out pokt exps - for personal care attendant
X X		P_F47 P_F53	PUF: Out pekt exps - adult day care services
X X		P_F53	PUF: Out pekt exps - respite care
Λ		P_F59	PUF: Out pckt exps - mh care or counseling

PUF	RUF Variable	LABEL
X	P_F63	PUF: Out pckt exps - other services
X	P_F65_10	What services is NAME not receiving - Other
X	P_F66_11	Why isn't NAME receiving these services - Other
X	P_F67A_AMT	PUF: Out pckt exp - medications - last month
X	P_F67B_AMT	PUF: Out pckt exp - special diet - last month
X	P_F67C_AMT	PUF: Out pckt exp - medical supplies - last month
X	P_F67D_AMT	PUF: Out pckt exp - special clothing - last month
X	P_F67F_AMT	PUF: Out pckt exp - higher hlth insur premiums - last month
X	P_F67G_AMT	PUF: Out pckt exp - extra phone bill charges - last month
X	P_F67H_AMT	PUF: Out pckt exp - extra utility bill charges - last month
X	P_F67I_AMT	PUF: Out pckt exp - other special needs items - last month
X	P_F67i	Out pckt exp - other special needs items
X	P_F69_6	What items does NAME need/not receive - Other
X	P_F7	PUF: Out pckt exps - phy, occup, speech therapy
X	P F71	PUF: Out pckt exp - durable med equipment/devices
X	P_F72	PUF: Total paid - durable med eqpment/devices
X	P_FATHER_AGE	PUF: Age of Father
X	P_FATHER_TYPE	PUF: Type of Father
X	P_G14	PUF: How much did NAME contribute last month
X	P_G42	PUF: How much financial assistance
X	P_H56_1	Reason benefit was not adequate
X	P_HOUSEHOLD_INCOME	PUF: Household income
X	P_HOUSEHOLD_NUMBER	PUF: Number of HH Members
X	P_I10	PUF: Parent1-type of employer
X	P_I14_NUM	PUF: Parent1- hrs/week for main job
X	P_I15_NUM	PUF: Parent1- total hrs/week for all jobs
X	P_I32_14	Parent1- main reason not working 1996 - other
X	P_I37_YR	PUF: Parent2-last worked year
X	P_I42	PUF: Parent2-type of employer
X	P_I46_NUM	PUF: Parent2- hrs/week for main job
X	P_I47_NUM	PUF: Parent2- total hrs/week for all jobs
X	P_I5_YR	PUF: Parent1- last worked year
X	P_I63_14	Parent2 - main reason not working 1996 - other
X	P_I68	PUF: Name last worked year
X	P_I69	PUF: Name-main reason for not working
X	P_I84	PUF: Name-type of job
X	P_I86	PUF: Name-type of employer
X	P_I90	PUF: Name- hrs/week for main job

PUF	RUF Variable	LABEL
X	P_J4	PUF: Who cared for NAME
X	P_J8	PUF: # of hours NAME was cared for
X	P_K110_AMT	PUF: NAMEs total income last month
X	P_L10	PUF: How long at current domicile
X	P_L2	PUF: How long at current domicile
X	P_L3	PUF: Type of domicile
X	P_LIVING_ARRANGEMENTS	PUF: Living Arrangements
X	P_M10	PUF: Parent2 born in US or abroad
X	P_M14	PUF: Language spoken in household
X	P_M2	PUF: Parent1 education level
X	P_M23	PUF: Mothers education level
X	P_M24	PUF: Fathers education level
X	P_M5	PUF: Parent1 born in US or abroad
X	P_M7	PUF: Parent2 education level
X	P_MOTHER_AGE	PUF: Age of Mother
X	P_MOTHER_TYPE	PUF: Type of Mother
X	P_OTHER_SSA_SSI_RCPT	Receipt of other SSA SSI benefits by household member
X	P_OUT_PCKT_HLTH_EXP	PUF: Total out of pocket health expenditures
X	P_PARENT1_EARN_MONTH	PUF: Parent 1 - Monthly Earnings
X	P_PARENT1_EARN_YR	PUF: Parent 1 - annual earnings
X	P_PARENT1_HRS_WK	PUF: Parent 1 - Total hours per week employed
	_	
X	P_PARENT2_EARN_MONTH	PUF: Parent 2 - monthly earnings
X	P_PARENT2_EARN_YR	PUF: Parent 2 - annual earnings
X	P_PARENT2_HRS_WK	PUF: Parent 2 - Total hours per week employed
X	P_RETIREMENT_RCPT	Receipt of other retirement benefits by household member
X	P_SM_CHILDREN	PUF: Number of sample member children in HH
X	P_SM_EARN_MONTH	PUF: Sample Member - Monthly Earnings
X	P_SM_EARN_YR	PUF: Sample Member - Annual Earnings
X	P_SM_HRS_WK	PUF: Sample Member - total hours per week employed
X	P_SM_INCOME_TOTAL	PUF: Sample Member Income
X	P_SSA_BENEFITS_AMT	PUF: Amount- Other SSA benefits Received

PUF	RUF	Variable	LABEL
X		P_SSDI_RCPT	Receipt of other SSDI benefits by household member
X		P_SSI_LAST_MONTH_AMT	PUF: SSI benefit - amount last month
X		P_SSPI_PAYMENTS_AMT	PUF: Amount- SSI revd other than NAME
X		P_SURVIVORS_RCPT	Receipt of other survivors benefits by household member
37		P_TOTAL_ASSETS_WITH_CA	DUTE TO A LIVE A LABOR.
X		R TOTAL HOUSEHOLD AGG	PUF: Total Household Assets
v		P_TOTAL_HOUSEHOLD_ASS	DITE Total Handle II Access (construit to construit to the construction to the construit to the construction to
X X		ETS D. household, sharpes	PUF: Total Household Assets (excluding cars/vehicles/home)
Λ	v	P_household_changes	Household changes to cope with loss of SSI benefits 00-Record Establishment
		RCD_JD00	96-Record Establishment
	X X	RCD_JD96 RDT8321	UNV-RESULT OF DDS DECISION
	X	RDT8322	UNV-RESULT OF DDS DECISION UNV-RESULT OF DDS DECISION
	X	RDT832B	OLD UNV FILE
	X	RDT832C	OLD UNV FILE OLD UNV FILE
		RDTOHA1	UNV-RESULT OF ALJ HEARING DECISION
	X	REC_2000	SSI recipient in 12/2000 (PSTAT00=C01)
	X		SSI recipient in 4/2002 (PSTAT=C01)
		REC_WR	SSI recipient in 12/1996 (PSTAT96=C01)
	X	REGION	Region of Sample Person from SSA File
	X	REPCUS00	00-Custody Code
		REPCUS96	96-Custody Code
	X	REPGC_00	00-Guardian/Competency Code
	X	REPGC_96	96-Guardian/Competency Code
	X	REPPYT00	00-Type of Payee
	X	REPPYT96	96-Type of Payee
	X	RFC8321	UNV-REGULATION BASIS CODE FROM DDS DECIS
	X	RFC8322	UNV-REGULATION BASIS CODE FROM DDS DECIS
X	X	RTYPE	Respondent Type
	X	SDX8321	UNV-SECONDARY DIAGNOSIS CODE FROM DDS DE
	X	SDX8322	UNV-SECONDARY DIAGNOSIS CODE FROM DDS DE
	X	SEX	Sample Person's Sex from SSA File (Preload)
	X	SEX_00	00-Sex
X	X	SPAN	Spanish Interview
	X	SSI	Ever Received SSI from SSS file (Survey Preload)
	X	SSI96	Sample Person Stopped Receiving SSI in 1996
X	X	SSTRATA	Sampling Strata(1-8)
	X	STAPMT00	00-State Supplementation Amount

PUF	RUF	Variable	LABEL
	X	STAPMT96	96-State Supplementation Amount
	X	STATE	State of Sample Person from SSA File
	X	STATUS	Complete(1) Ineligible(2)
	X	STATUS00	Status00=1 if PSTAT00 not missing or 'T'
	X	STATUS96	Status96=1 if PSTAT96 not missing or 'T'
	X	STOPRD51	UNV-STOP DATE FROM SSR SELECTED 05/00
	X	STOPRD91	UNV-STOP DATE FROM SSR SELECTED 09/00
X	X	STRATUM	Stratum of Sample Person
	X	SUPAMT00	00-Current Amount of State Supp
	X	SUPAMT96	96-Current Amount of State Supp
	X	TM6	CHECK: spouse/partner
	X	TOA51	UNV-TYPE OF ACTION FROM SSR SELECTED 05/
	X	TOA91	UNV-TYPE OF ACTION FROM SSR SELECTED 09/
	X	TOA_00	00-Transaction Code
	X	TOA_96	96-Transaction Code
	X	TotalTime	Interview Length
	X	WAVE	Wave of Sample Release
X	X	WGTFINAL	Weight: Final PS Weight
	X	ZIP_00	00-Zip Code
	X	ZIP_96	96-Zip Code
X	X	pseudoPSU	Variance estimation PSU for Taylor Series Sampling Variances
X		pseudoStrata	Variance estimation Strata for Taylor Series Sampling Variances
	X	tK121	CHECKa91: Does Name have Children Living With Him/Her
		tK73	CHECK: Does name have spouse or children with him/her
		tK85	CHECKa91: Does Name have Children Living With Him/Her
		tK91	CHECK: Does name have spouse or children with him/her
	X	tN29ef	CHECK: Sample age <17 or 17+